

FIG. 1

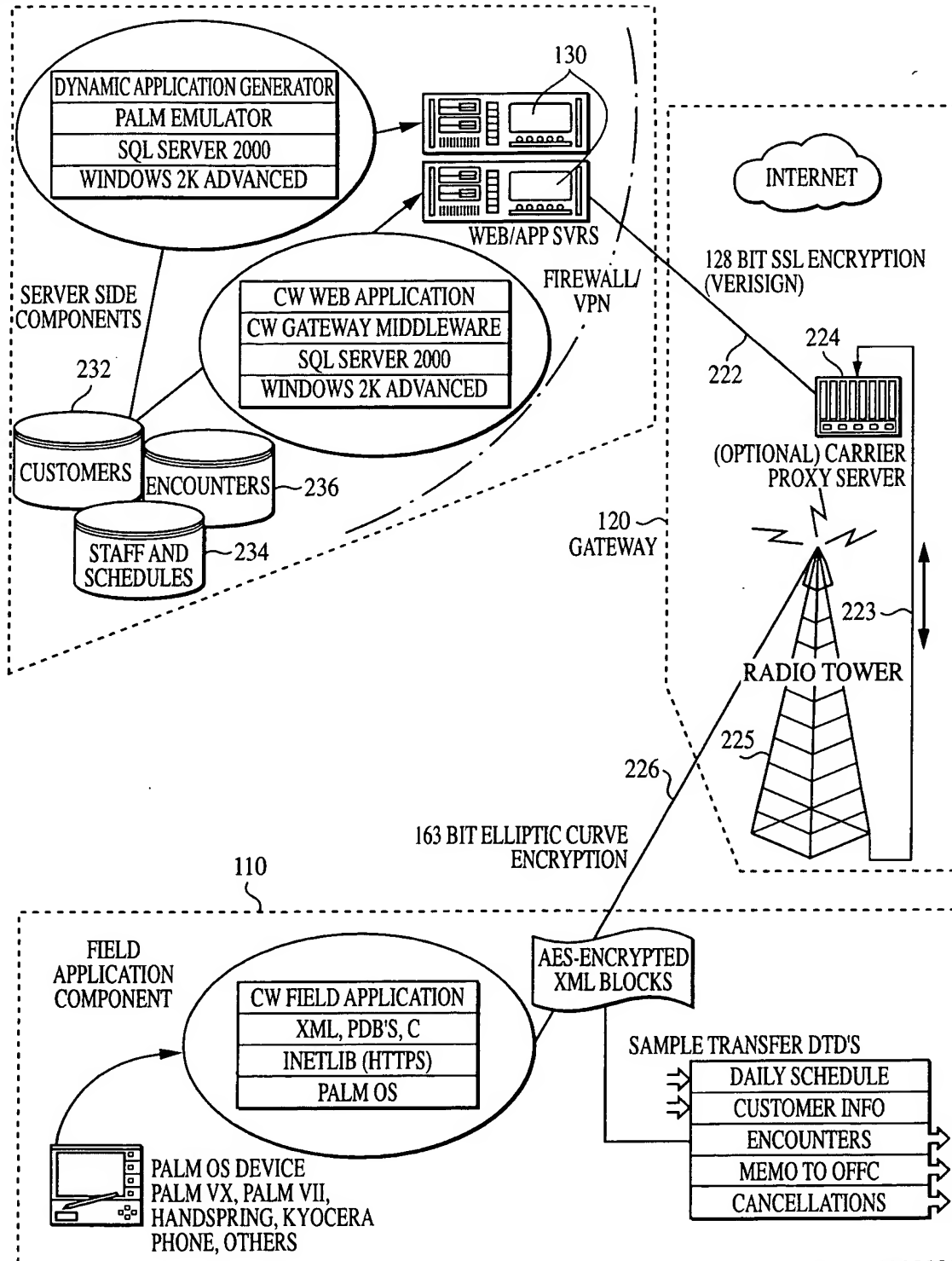


FIG. 2(a)

BETTER HEALTHCARE COMPANY									
CONSUMER		CASE MGR		PLAN		SERVICE		ADMIN	
BILLING		REPORTS		LOGOUT					

☐ LS POWERED BY CREDIBLE WIRELESS

```

<?xml version="1.0" ?>
-<Export>
- <ExportLine>
  <residence_type>Private home</residence_type>
  <sex>Male</sex>
  <last_name>DOE</last_name>
  <first_name>GEPETTO</first_name>
  <dob>07111969</dob>
  <Low_Self-Esteem />
  <Hopelessness />
  <Worthlessness />
  <Pending_Doom />
  <duration>1/1/1900 12:14:00 AM</duration>
</ExportLine>
-<ExportLine>
  <residence_type>Private home</residence_type>
  <sex>Male</sex>
  <last_name>DOE</last_name>
  <first_name>GEPETTO</first_name>
  <dob>07111969</dob>
  <Low_Self-Esteem />Y</Low_Self-Esteem>
  <Hopelessness />
  <Worthlessness />
  <Pending_Doom />
  <duration>1/1/1900 12:01:00 AM</duration>
</ExportLine>
    
```

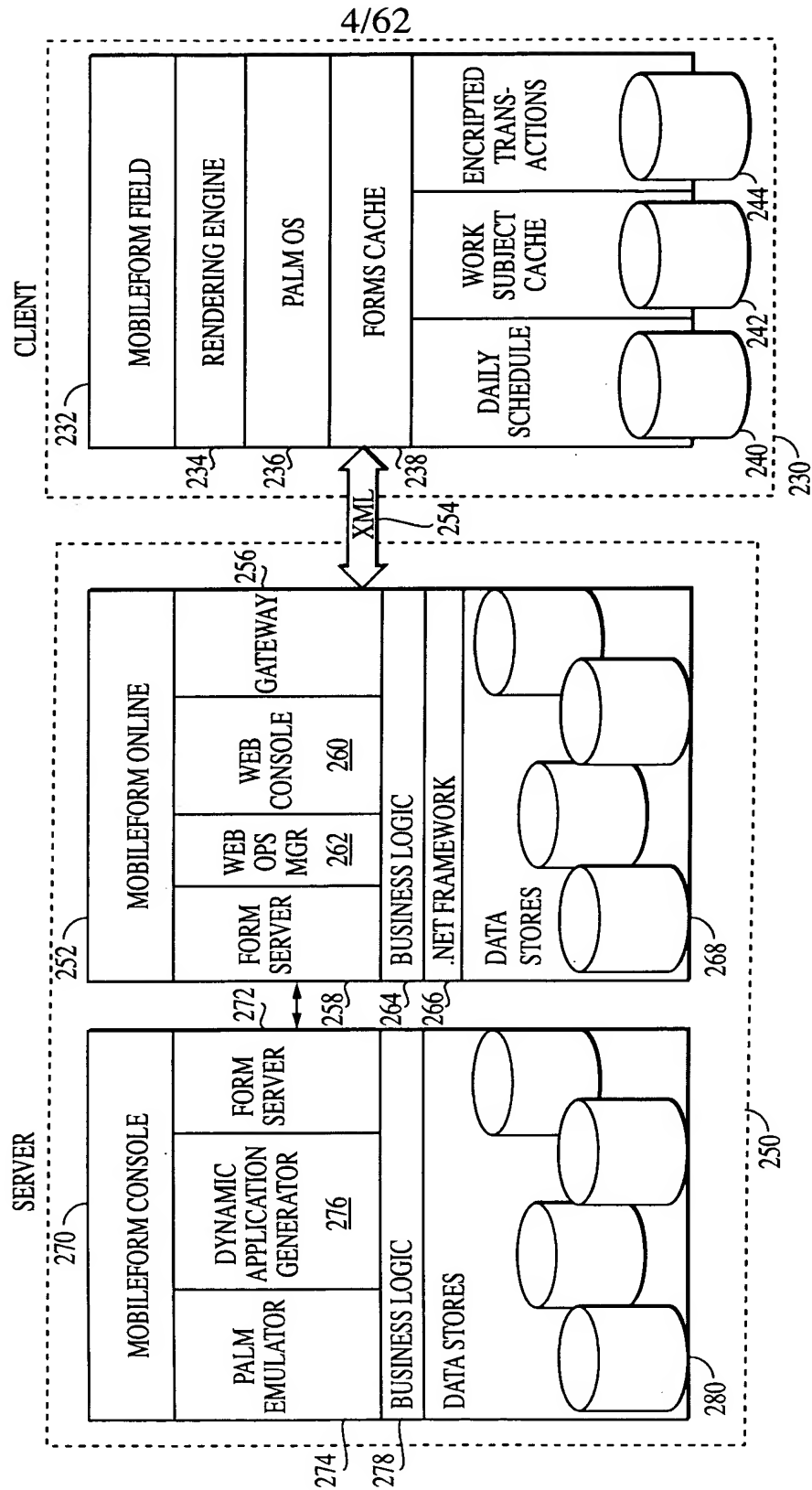


FIG. 2(c)

EHOMECARE - MICROSOFT INTERNET EXPLORER
FILE EDIT VIEW FAVORITES TOOLS HELP

BACK FORWARD STOP REFRESH HOME SEARCH FAVORITES HISTORY MAIL PRINT EDIT DISCUSS DEL HOME

LINKS >> ADDRESS >> HTTPS://WWW.EHOMECARE.WS: SEARCH >> MESSENGER >> BOOKMARKS >> MY YAHOO! >> MAIL >> NEWS >> ENTERTAINMENT >> SPORTS >> SHOPPING >>

302 304 306 308 ECRECIBLEHOMECARE™ BY ECRECIBLE SOLUTIONS, INC.

LOGIN CLIENTS PERSONNEL PLANNER ADMIN

CLIENT LIST: A B C E F G H I J K L M N O P R S T U V W Y Z ALL ACTIVE FILTER 330

SHOWING 1 TO 17 OF 22.

#	LAST NAME	FIRST NAME	AREA	CITY	STATE	BIRTHDATE	PHONE(H)	STATUS	ID
1	DOE	ANN	AA	BOWIE	MD	3/12/1971	(301) 555-2323	ACTIVE	1708
2	DOE	JOHN	AA	BOWIE	MD	3/31/1960	(301) 555-1212	ACTIVE	1679
3	DOE	LISA	AA	ELSEWHERE	MD	6/2/1951	410-333-5455	ACTIVE	1568
4								ACTIVE	1557
5								ACTIVE	1540
6								ACTIVE	1743
7								ACTIVE	1754
8								ACTIVE	1755
9								ACTIVE	1599
10								ACTIVE	1476
11								ACTIVE	1850
12								ACTIVE	1311
13								ACTIVE	1735
14								ACTIVE	1865
15	DOE	ANN	AA	BOWIE	MD	3/12/1971	(301) 555-2323	ACTIVE	1833
16	DOE	JOHN	AA	BOWIE	MD	3/31/1960	(301) 555-1212	ACTIVE	1832
17	DOE	LISA	AA	ELSEWHERE	MD	6/2/1951	410-333-5455	ACTIVE	1835

316

ADD CLIENT 314

FIG. 3



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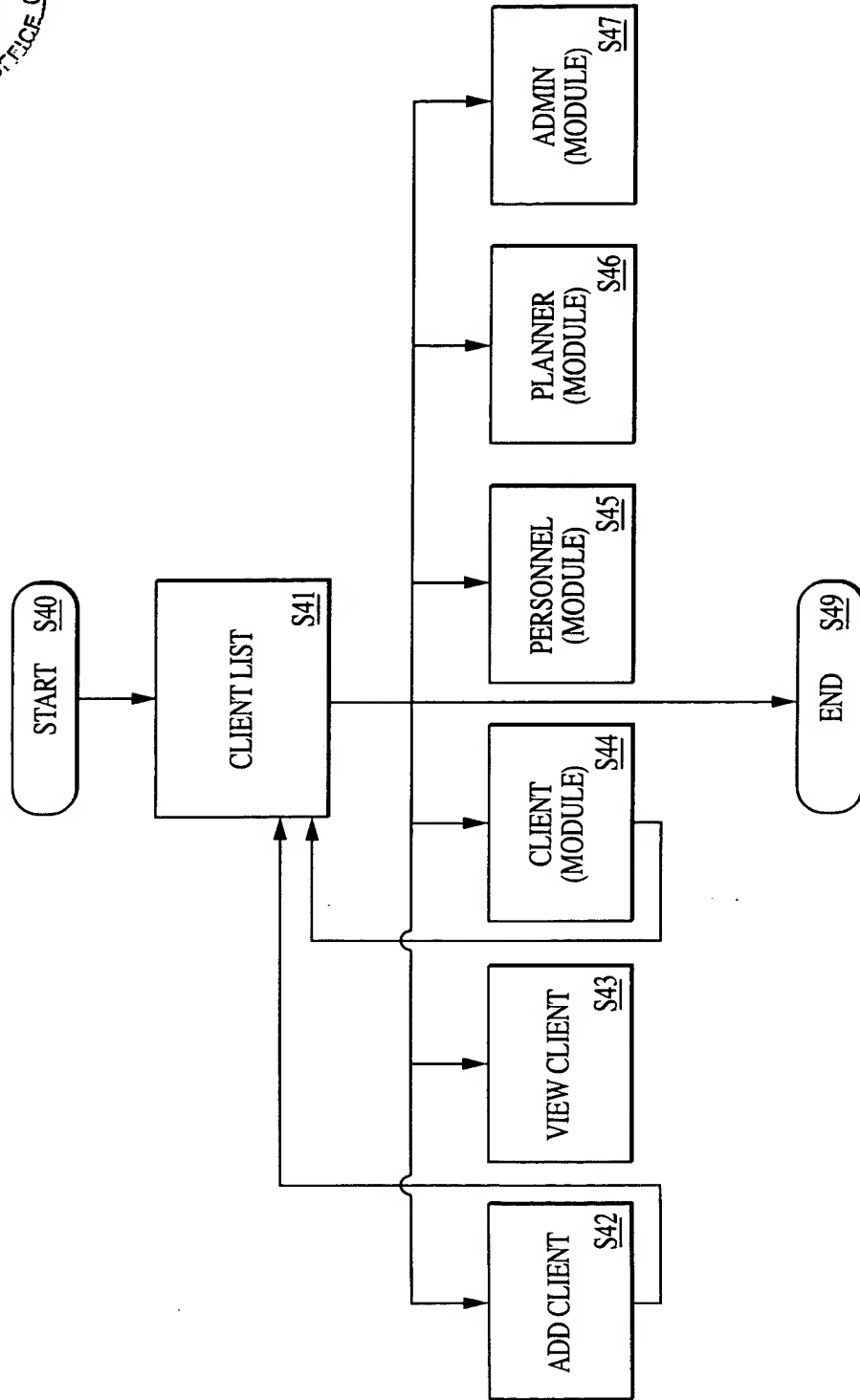
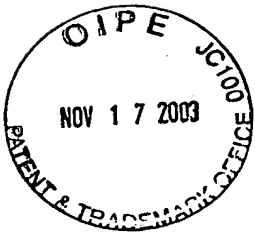


FIG. 4



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FIG. 5

EHOME CARE - MICROSOFT INTERNET EXPLORER	
FILE EDIT VIEW FAVORITES TOOLS HELP	
BACK FORWARD STOP REFRESH HOME SEARCH FAVORITES HISTORY MAIL PRINT EDIT DISCUSS DEL HOME	
LINKS >> ADDRESS HTTPS://WWW.EHOME CARE.WS.	
SEARCH MESSENGER MY YAHOO! MAIL NEWS ENTERTAINMENT SPORTS SHOPPING <<	
<div>ECREDIBLEHOME CARE™ BY ECREDIBLE SOLUTIONS, INC.</div>	
LOGIN CLIENTS PERSONNEL PLANNER ADMIN	
CLIENT ADD/UPDATE:	
FIRST NAME:	LAST NAME:
SSN:	DOB:
MAS ID:	ACCESS 1 CODE: CHEESE
ADDRESS1:	ADDRESS2:
CITY:	STATE:
ZIP:	CLIENT STATUS: ACTIVE
HOME PHONE:	GEOGRAPHIC AREA: AA
EMERGENCY CONTACT:	EMERGENCY PHONE:
MARITAL STATUS: DIVORCED	SPOUSE NAME:
REFERRED BY:	SOURCE/AUTH REFERRAL:
AUTH NO:	AUTH DATES: START: END:
AUTH UNITS:	AUTH UNITS USED:
COPAY FEE:	COPAY FEE:
FLAT FEE:	FIRST SERVICE DATE:
REFERRAL DATE:	ASSESSMENT DATE:
504 ~ ADD CLIENT	CANCEL ~ 506
DONE INTERNET	



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600

EHOMECARE - MICROSOFT INTERNET EXPLORER

FILE EDIT VIEW FAVORITES TOOLS HELP

BACK FORWARD STOP REFRESH HOME SEARCH FAVORITES HISTORY MAIL PRINT EDIT DISCUSS DEL HOME

LINKS >> ADDRESS >> HTTPS://WWW.EHOMECARE.WS: SEARCH >> MESSENGER >> BOOKMARKS >> MY YAHOO! >> MAIL >> NEWS >> ENTERTAINMENT >> SPORTS >> SHOPPING >>

302 304 306 308 ECRECIBLEHOMECARE™ BY ECRECIBLE SOLUTIONS, INC.

LOGIN CLIENTS PERSONNEL PLANNER ADMIN

CLIENT VIEW

VISITS | MEDICATION & TREATMENT PLAN | ASSIGN EMPLOYEES

NAME:	DOE, JOHN	CLIENT STATUS:	ACTIVE
SSN:	111-23-2323	DOB:	3/31/1960
MAS ID:	873678277	AXIS 1 CODE:	296 31 - MAJOR DEPRESSION, RECURRENT, MILD
ADDRESS1:	12013 HAPPY LANE	ADDRESS2:	
CITY, STATE:	BOWIE, MD	ZIP:	20715
HOME PHONE:	(301) 555-1212	GEOGRAPHIC AREA:	AA
EMERGENCY CONTACT:	MARY (SISTER)	EMERGENCY PHONE:	(301) 556-1212
MARITAL STATUS:	DIVORCED	SPOUSE NAME:	NONE
REFERRED BY:	PSYCHIATRIST	AUTH NO.:	H2210345501
AUTH START DATE:	1/1/2002	AUTH END DATE:	7/1/2001
AUTH UNITS:	130	AUTH UNITS USED:	
COPAY FEE:		COPAY PD:	
FLAT FEE:		FIRST SERVICE DATE:	1/1/2001
REFERRAL DATE:	1/1/16/2000	ASSESSMENT DATE:	1/1/16/2000
ASSIGNED EMPLOYEES: GINA BRADLEY, LISA CHAMBERS, FRANK REDICS			
UPDATE DELETE			

606

604

606

606

602

DONE

INTERNET

FIG. 6



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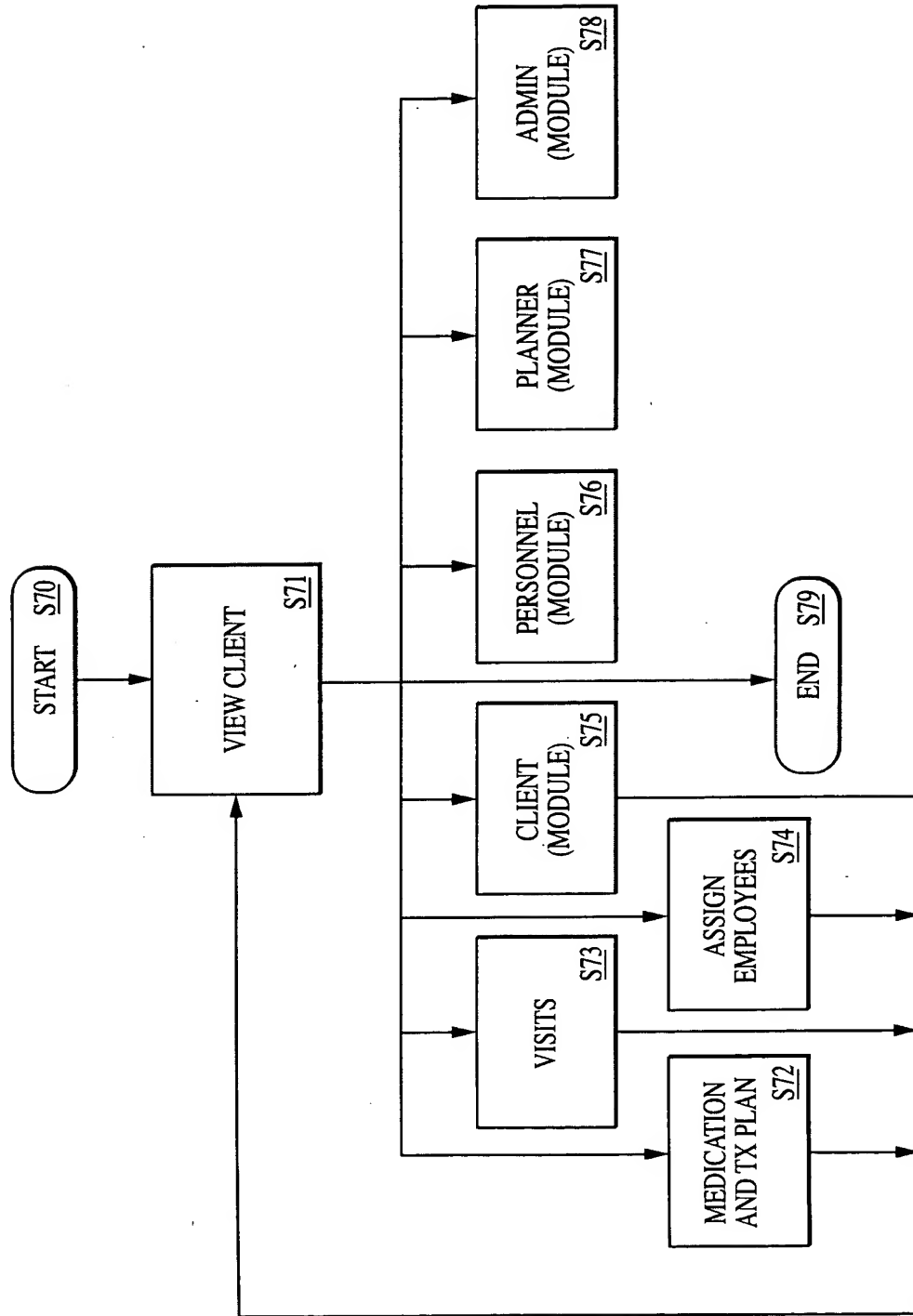


FIG. 7



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812

804

808

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FIG. 8

MEDICATIONS & TREATMENT PLAN FOR JOHN DOE

MEDICATIONS						
MEDICATION	DOSAGE	FREQUENCY	PROVIDER	DATE		
COGENTIN	1MG	BID	VINCENT CHANEY, M.D.	STARTED 1/16/2000	<u>Q EDIT</u>	<u>Q EDIT</u>
LITHIUM CARBONATE	200MG	BID	VINCENT CHANEY, M.D.	STARTED 1/16/2000	<u>Q EDIT</u>	<u>Q EDIT</u>

MEDICATION

DOSAGE

FREQUENCY

PROVIDER

START DATE

ADD

TREATMENT PLAN

START DATE

1/17/2000

GOALS

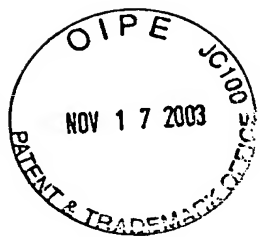
1. JOHN WILL BE ABLE TO BUDGET HIS MONEY AND SAVE \$100 BY 5/17/2001

2. JOHN WILL FOLLOW THE RECOMMENDATIONS OF HIS PSYCHIATRIST AND ATTEND ALL PSYCHIATRIC APPOINTMENTS WITHOUT PROMPTING BY 5/17/2001.

3. JOHN WILL BE ABLE TO DETERMINE WHEN HE IS FEELING ANXIOUS AND IDENTIFY AND USE THE TECHNIQUES THAT HELP HIM STABILIZE BY 5/17/2001.

SAVE CHGS

NEW



CLIENT VISIT LIST:
SHOWING 1 TO 2 OF 2.

APPROVED: START DATE: END DATE:

ID	APPROVE	CLIENT NAME	EMP NAME	STATUS	DATE	TIME IN	TIME OUT	PLAN DATE
6113	<input type="checkbox"/>	JOHN DOE	UPPULURI	COMPLETED	1/30/2001	12:56:00 PM	1:06:00 PM	1/30/2001
4240		JOHN DOE	UPPULURI	COMPLETED	1/24/2001	3:00:00 PM	3:05:00 PM	NO PLAN

APPROVE ALL CHECKED CLIENT VISITS

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FIG. 9



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1016
EMPLOYEE ASSIGNMENT

1010
CLIENT NAME: DOE, JOHN SSN: 111-23-2323

CHOOSE EMPLOYEE ABCDEFGHIJKL MNOPRSTUVWYZ ALL SHOW ASSIGNED ONLY

#	LAST NAME	FIRST NAME	CITY	SSN	
1	_____	_____	_____	_____	<u>ASSIGN</u>
2	_____	_____	_____	_____	<u>ASSIGN</u>
3	_____	_____	_____	_____	<u>ASSIGN</u>
4	_____	_____	_____	_____	<u>ASSIGN</u>
5	_____	_____	_____	_____	<u>ASSIGN</u>
6	_____	_____	_____	_____	<u>ASSIGN</u>
7	_____	_____	_____	_____	<u>ASSIGN</u>
8	_____	_____	_____	_____	<u>ASSIGN</u>
9	UPPULURI	STANLEY	BALTIMORE	209-24-2278	<u>*REMOVE (UNASSIGN)</u>
10	_____	_____	_____	_____	<u>ASSIGN</u>
11	_____	_____	_____	_____	<u>ASSIGN</u>
12	_____	_____	_____	_____	<u>ASSIGN</u>
13	_____	_____	_____	_____	<u>ASSIGN</u>

1812

1814

FIG. 10

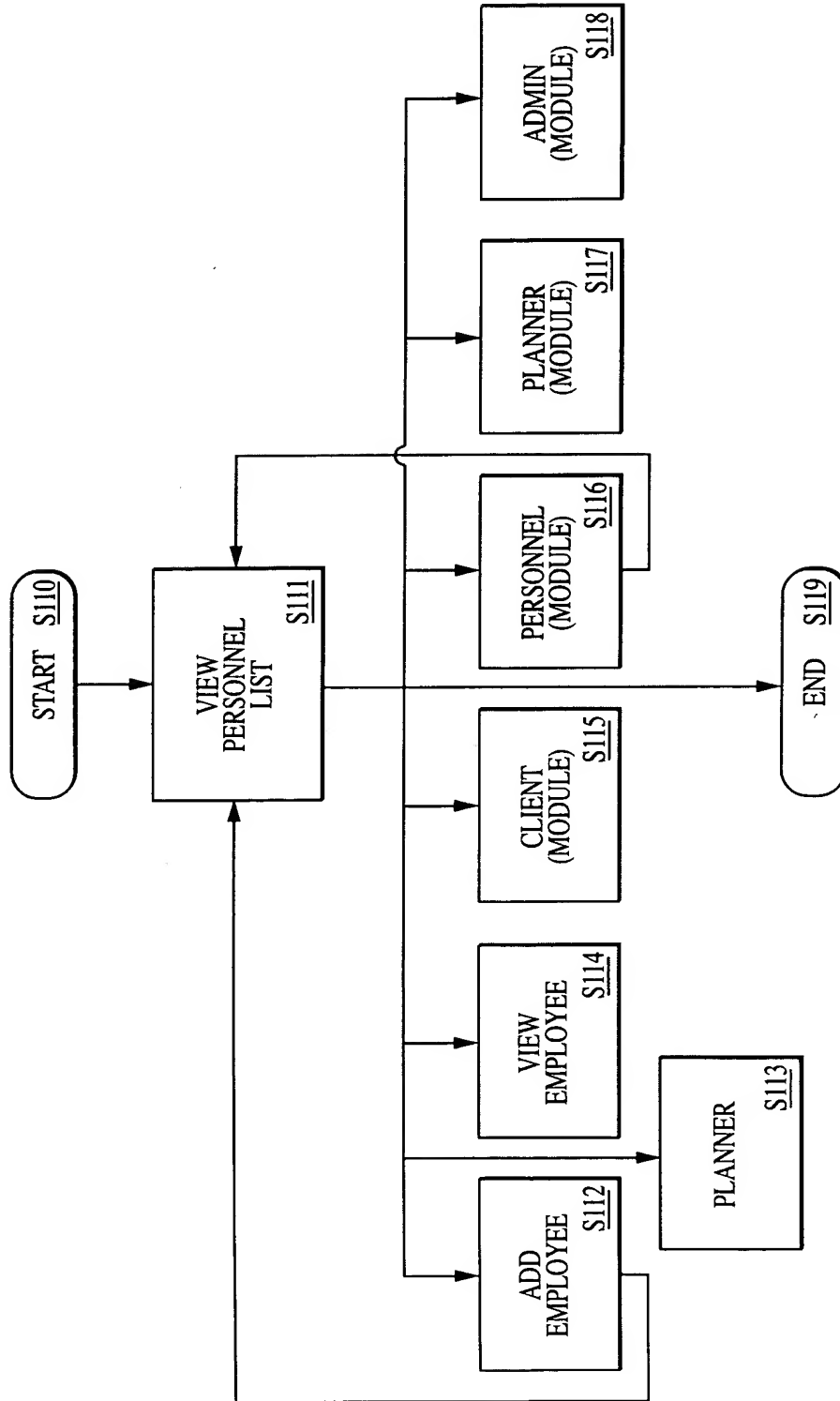



FIG. 11





ECREDIBLEHOME CARE™
BY ECREDIBLE SOLUTIONS, INC.

LOGIN | CLIENTS | PERSONNEL | PLANNER | ADMIN |

EMPLOYEE LIST ABCDEFGHIJKLMNOPRSTUWYZAL ACTIVE FILTER
SHOWING 1 TO 1 OF 1.

#	LAST NAME	FIRST NAME	CITY	PHONE(H)	PHONE(W)	ID	SSN	
1	<u>UPPULURI</u>	STANLEY	BALTIMORE	410-555-1212	410-555-1222	48	209-24-2278	<u>Q</u> <u>VIEW</u> <u>Q</u> <u>PLANNER</u>

1214 1216
1214 1216

ADD EMPLOYEE 1212

FIG. 12



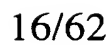
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EMPLOYEE ADD/UPDATE:

FIRST NAME:	<input type="text"/>	LAST NAME:	<input type="text"/>
MIDDLE NAME:	<input type="text"/>	NICK NAME:	<input type="text"/>
TITLE:	<input type="text"/>	REGION:	<input type="text"/>
SSN:	<input type="text"/>	DATE OF BIRTH:	<input type="text"/>
SUPERVISOR:	<input type="text"/>	EXTERNAL ID:	<input type="text"/>
ADDRESS1:	<input type="text"/>	ADDRESS2:	<input type="text"/>
CITY:	<input type="text"/>	STATE:	<input type="text"/>
ZIP:	<input type="text"/>	PAGER NUMBER:	<input type="text"/>
HOME PHONE:	<input type="text"/>	MOBILE NUMBER:	<input type="text"/>
WORK PHONE:	<input type="text"/>	FAX NUMBER:	<input type="text"/>
EMERGENCY CONTACT:	<input type="text"/>	EMERGENCY PHONE:	<input type="text"/>
HIRE DATE:	<input type="text"/>	TERM DATE:	<input type="text"/>
STATUS:	<input type="text" value="INACTIVE"/>		

1312 1314

FIG. 13

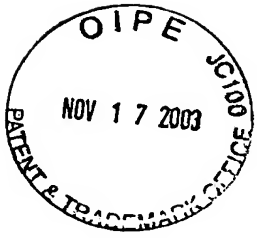


1402

WEEKLY PLANNER FOR VYNE UPPULURI • 2/4/2001

SUN 2/4/2001	MON 2/5/2001	TUE 2/6/2001	WED 2/7/2001	THU 2/8/2001	FRI 2/9/2001	SAT 2/10
		DOE, J (SCHEDULED) <input checked="" type="checkbox"/>	DOE, J (SCHEDULED) <input checked="" type="checkbox"/>	DOE, J (SCHEDULED) <input checked="" type="checkbox"/>	DOE, J (SCHEDULED) <input checked="" type="checkbox"/>	
		0630	0630	0630	1700	
		DOE, H (SCHEDULED) <input checked="" type="checkbox"/>	DOE, H (SCHEDULED) <input checked="" type="checkbox"/>	DOE, H (SCHEDULED) <input checked="" type="checkbox"/>	DOE, H (SCHEDULED) <input checked="" type="checkbox"/>	
		0930	0930	0930	1830	

FIG. 14



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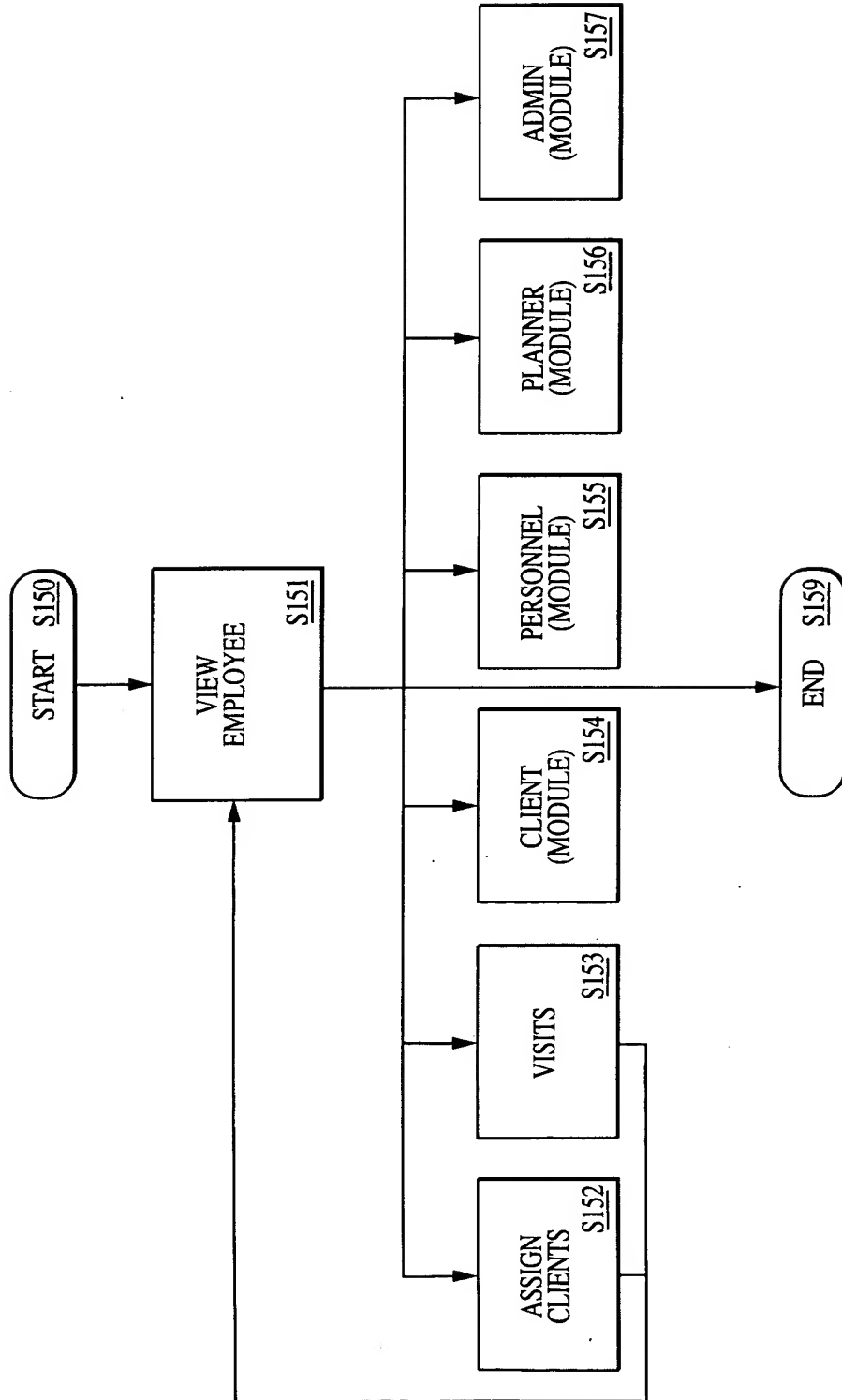


FIG. 15



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1604 1606

EMPLOYEE VIEW

NAME:	UPPULURI, STANLEY	NICK NAME:	STAN
SSN:	209-24-2278	DOB:	10/10/1957
SUPERVISOR:	TAMMY/PHILIPPE	EXTERNAL ID:	048
TITLE:	MENTAL HEALTH AIDE	REGION:	BALTIMORE
ADDRESS1:	1336 UNDERWOOD DR.	ADDRESS2:	
CITY, STATE:	BALTIMORE, MD	ZIP:	21239
HOME PHONE:	410-555-1212	MOBILE PHONE:	410-555-1222
WORK PHONE:		FAX NUMBER:	
PAGER NUMBER:		STATUS:	ACTIVE
EMERGENCY CONTACT:	MELINDA UPPULURI	EMERGENCY PHONE:	410-555-1212
HIRE DATE:	1/6/2000	TERM DATE:	
NOTES:			
ASSIGNED CLIENTS:	JOHN DOE		

1602 1608

Q VISITS | Q ASSIGN CLIENTS

UPDATE | DELETE | EDIT LOGIN

FIG. 16



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1706

• CLIENT SUCCESSFULLY ASSIGNED TO EMPLOYEE CLICK HERE TO RETURN TO EMPLOYEE RECORD

CLIENT ASSIGNMENT 1704

EMPLOYEE NAME: UPPULURI, STAN SSN 209-24-2278

CHOOSE CLIENT ABCDEFGHIJKLMNPRSTUWYZALL SHOW ASSIGNED ONLY

#	LAST NAME	FIRST NAME	CITY	SSN
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	DOE	JOHN	BOWIE	111-23-2323
13	_____	_____	_____	_____
14	_____	_____	_____	_____

1702

*REMOVE (UNASSIGN)

FIG. 17



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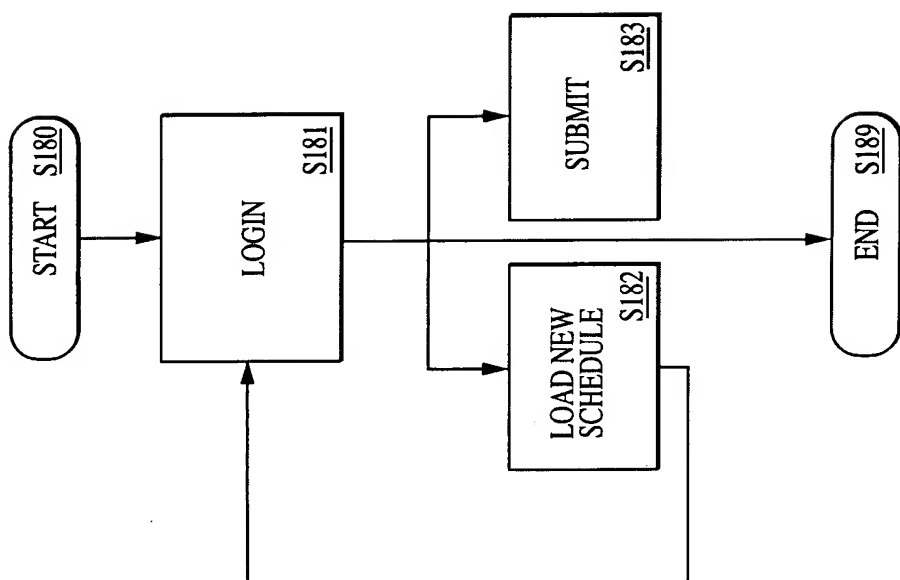


FIG. 18



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COMPANY NAME HERE	
WELCOME TO ECREDIBLEHOMECARE™	
LOGIN:	<u>USERNAME</u>
PASSWORD:	<u>ENTER</u>
<input type="checkbox"/> LOAD NEW SCHEDULE	
<div>SUBMIT RESET</div>	

FIG. 19

DAILY CLIENTS		2006
GROUP ACTIVITY		10:00 AM
JOHN DOE		10:15 AM
ALEX DOE		10:30 AM
LATONJA DOE		11:00 AM
LISA DOE		11:30 AM
KIM DOE		12:00 PM
BETTY DOE		12:30 PM
TYRONE DOE		1:00 PM
GRETA DOE		1:30 PM
LAURIE DOE		2:30 PM
2002	2008	2004
ADD UNSCHEDULED		ADMIN TIME

FIG. 20



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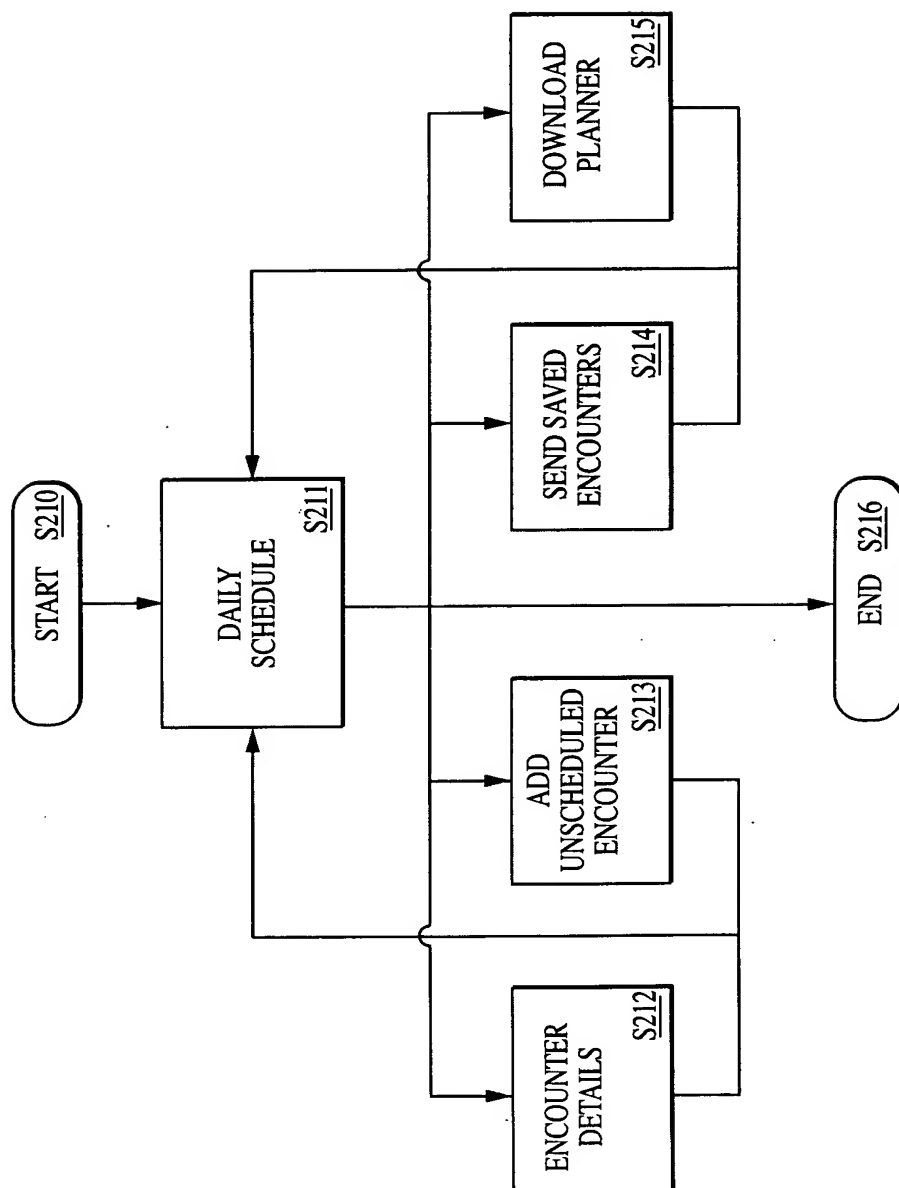


FIG. 21



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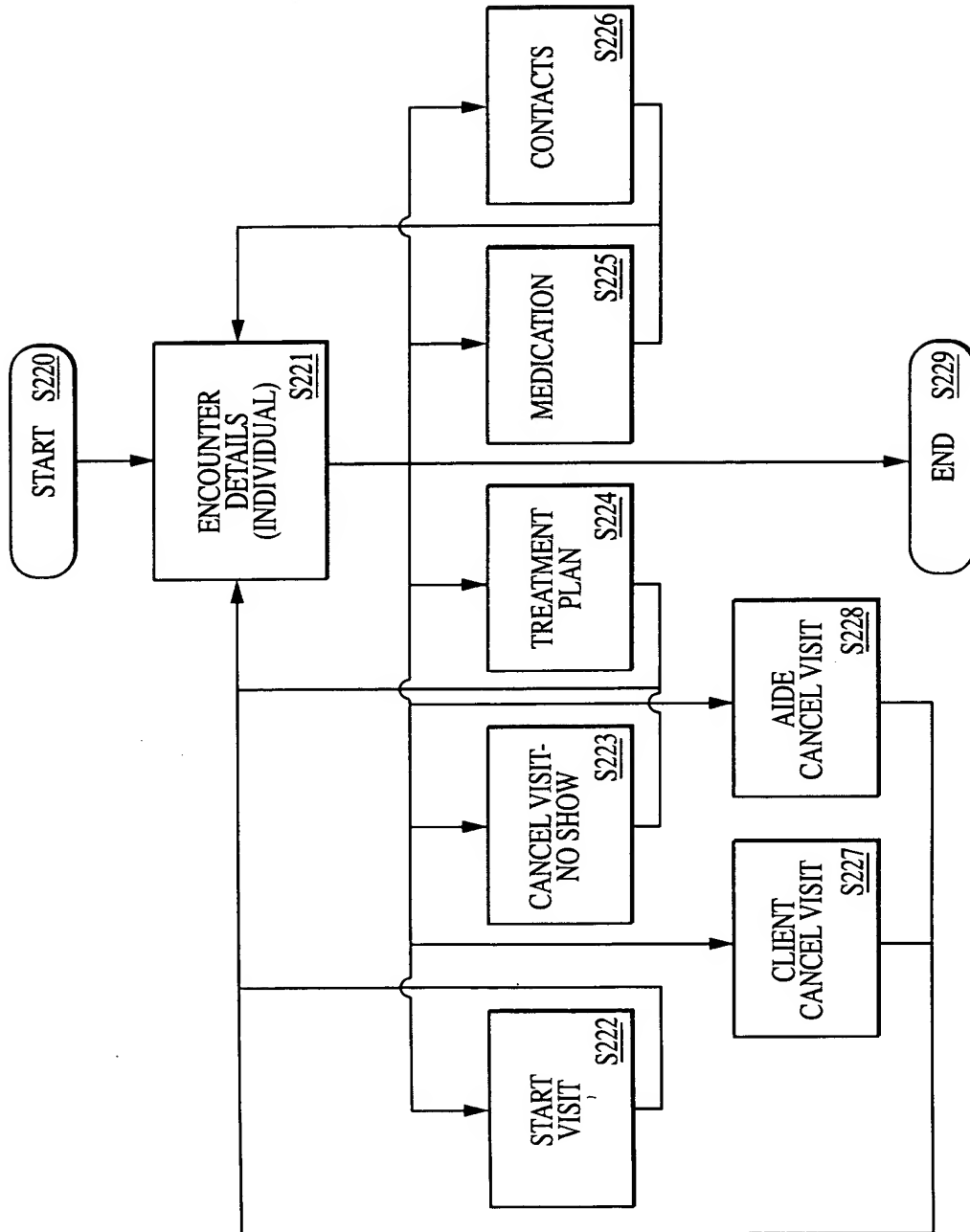


FIG. 22



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ADD UNSCHEDULED CLIENT

ENTER CLIENT INFORMATION

* ALL FIELDS REQUIRED

FIRST NAME:

LAST NAME:

MA#:

CANCEL OK

2302

2304

2308

2306

FIG. 23

DAILY CLIENTS

GROUP ACTIVITY 10:00 AM

JOHN DOE 11:15 AM

ALEX DOE 12:00 PM

GRETA DOE 3:00 PM

ADD UNSCHEDULED ADMIN TIME

2404

FIG. 24



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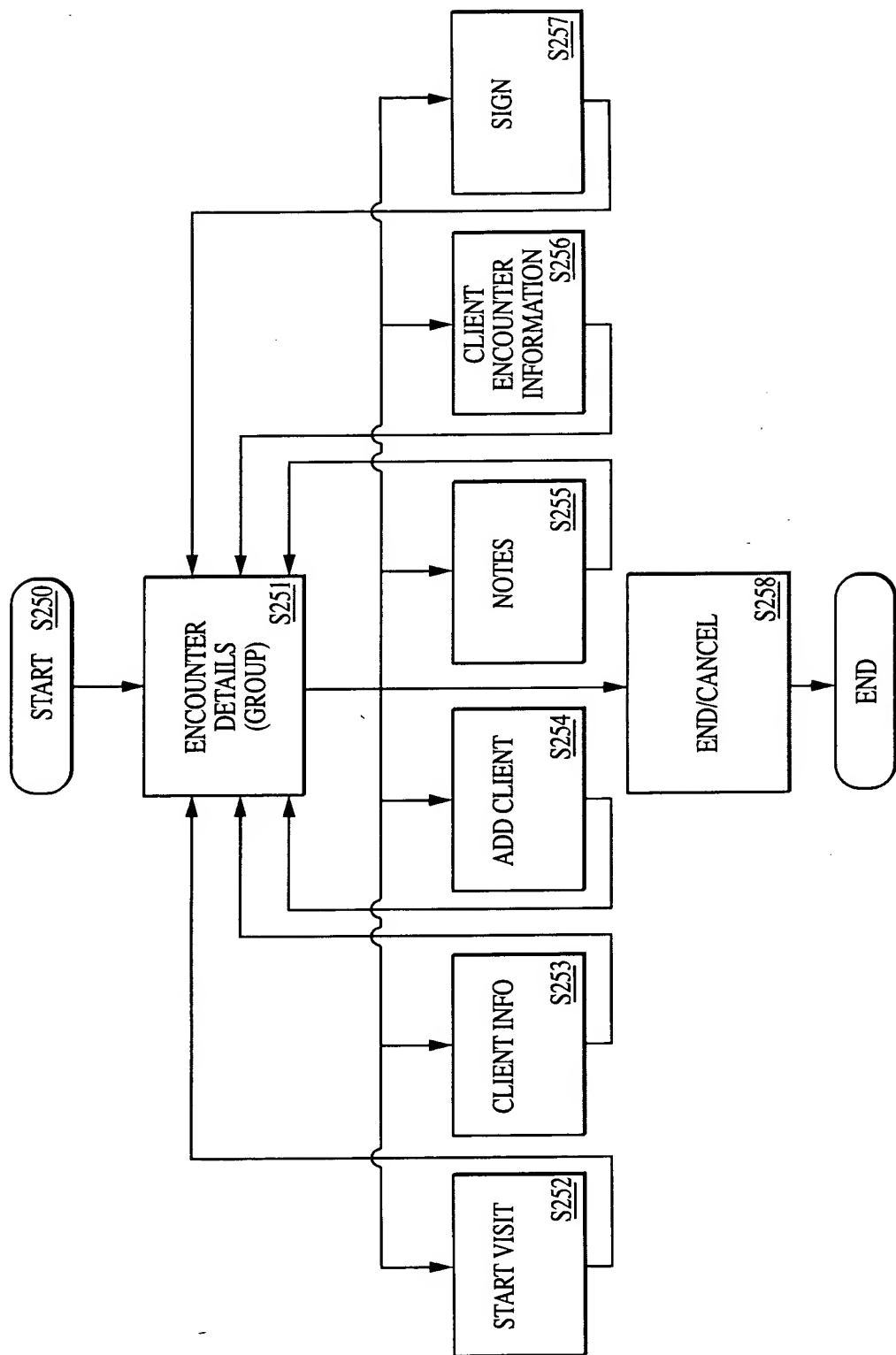


FIG. 25



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BYTES RECEIVED = 288	
SENDING VISIT: JOHN DOE	
EHOME CARE	
<input checked="" type="checkbox"/> CLIENT VISIT FOR DOE SUCCESSFULLY UPLOADED AND SAVED. : 3:25 PM	
<input type="button" value="OK"/>	

FIG. 26

DAILY CLIENTS	
<input type="button" value="GROUP ACTIVITY"/>	10:00 AM
✓ <input type="button" value="JOHN DOE"/>	11:15 AM
<input type="button" value="ALEX DOE"/>	12:00 PM
<input type="button" value="GRETA DOE"/>	3:00 PM
<input type="button" value="ADD UNSCHEDULED"/> <input type="button" value="ADMIN TIME"/>	

FIG. 27



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CLIENT DETAILS	
JOHN DOE	11:15 AM
12013 HAPPY LANE	
BOWIE	MD 20000
410-555-5565	INS. 012345678901
WORK ON BUDGET GOAL	
2802 START VISIT	
2804 AIDE CANCEL	2810 TX PLAN
2806 CLIENT CANCEL	2812 MEDS
2808 NO SHOW	2814 CONTACTS
2818 EMAIL OFFICE	2816 GO BACK

FIG. 28

CLIENT VISIT	
MAIN CATEGORIES	
2902 { DAILY LIVING SKILLS COMMUNITY LIVING SKILLS MONEY PLANNING MEDICATION MONITORING CRISIS INTERVENTION SYMPTOM & STRESS MGMT }	
2904 CANCEL	2906 END INTERVIEW

FIG. 29



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SIGNATURE CAPTURE

EMPL 3002

CLIENT 3004

CLEAR SAVE 3006

FIG. 30

TREATMENT PLAN GOALS

1. JOHN WILL BE ABLE TO BUDGET HIS MONEY AND SAVE \$100 BY 1/17/2002.

2. JOHN WILL FOLLOW THE RECOMMENDATIONS OF HIS PSYCHIATRIST AND ATTEND ALL PSYCHIATRIC APPOINTMENTS WITHOUT PROMPTING BY 1/17/2001.

3. JOHN WILL BE ABLE TO DETERMINE

OK

FIG. 31



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MEDICATIONS	
PROZAC, 10MG, TID VINCENT, CHANEY, M.D., 7/1/2001	
KLONOPIN, 5MG; 1 TAB AT BEDTIME VINCENT, CHANEY, M.D., 7/1/2001	
COGENTIN, 1 MG, BID VINCENT, CHANEY, M.D., 11/16/2000	
LITHIUM CARBONATE, 200MG, BID VINCENT, CHANEY, M.D., 11/16/2000	
<input type="button" value="OK"/>	

FIG. 32

CONTACT INFORMATION	
MR. AND MRS. DOE - EMERGENCY 1001 NOWHERE VINCENT, CHANEY, M.D.- PSYCHIATRIST	
DOOGIE HOUSER, M.D.- GP (410) 384-3422	
DR. DORMAN DOODLELINKS - THERAPIST #202-393-2200	
DR. BOB - NEUROLOGIST	
<input type="button" value="OK"/>	

FIG. 33

FIG. 35



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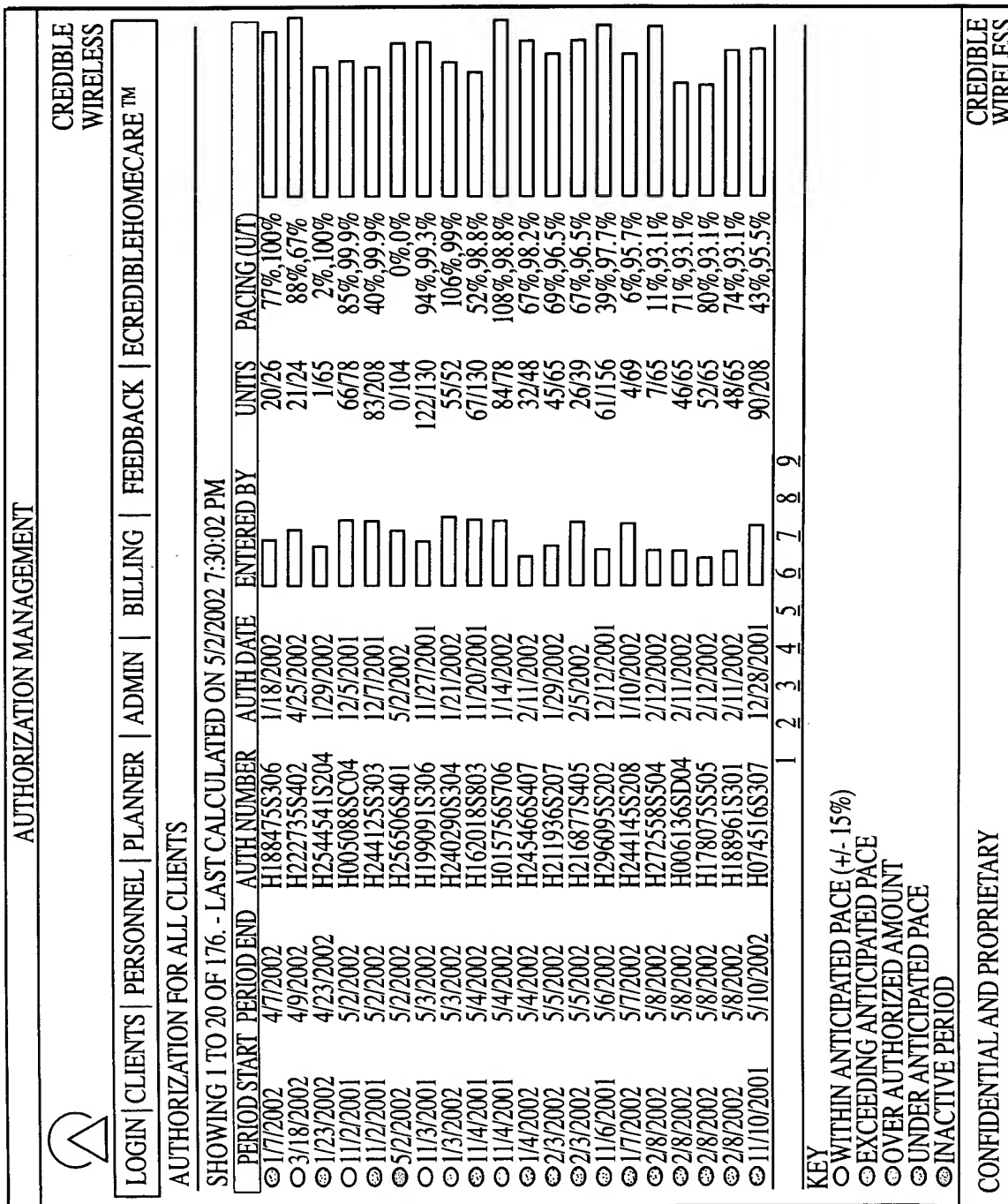
RPTCONTACTSHEET	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RPTPRINTOUTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SCHEDULE CTAB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECURITYUPDATE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TIMECHANGELIST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRACKER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRANSFERLOGLIST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRANSFERLOGVIEW	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TXXRXUPDATE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TXXRXVIEW	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
USERADD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
USERLIST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
USERUPDATE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FIG. 36(b).



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FIG. 37(a)



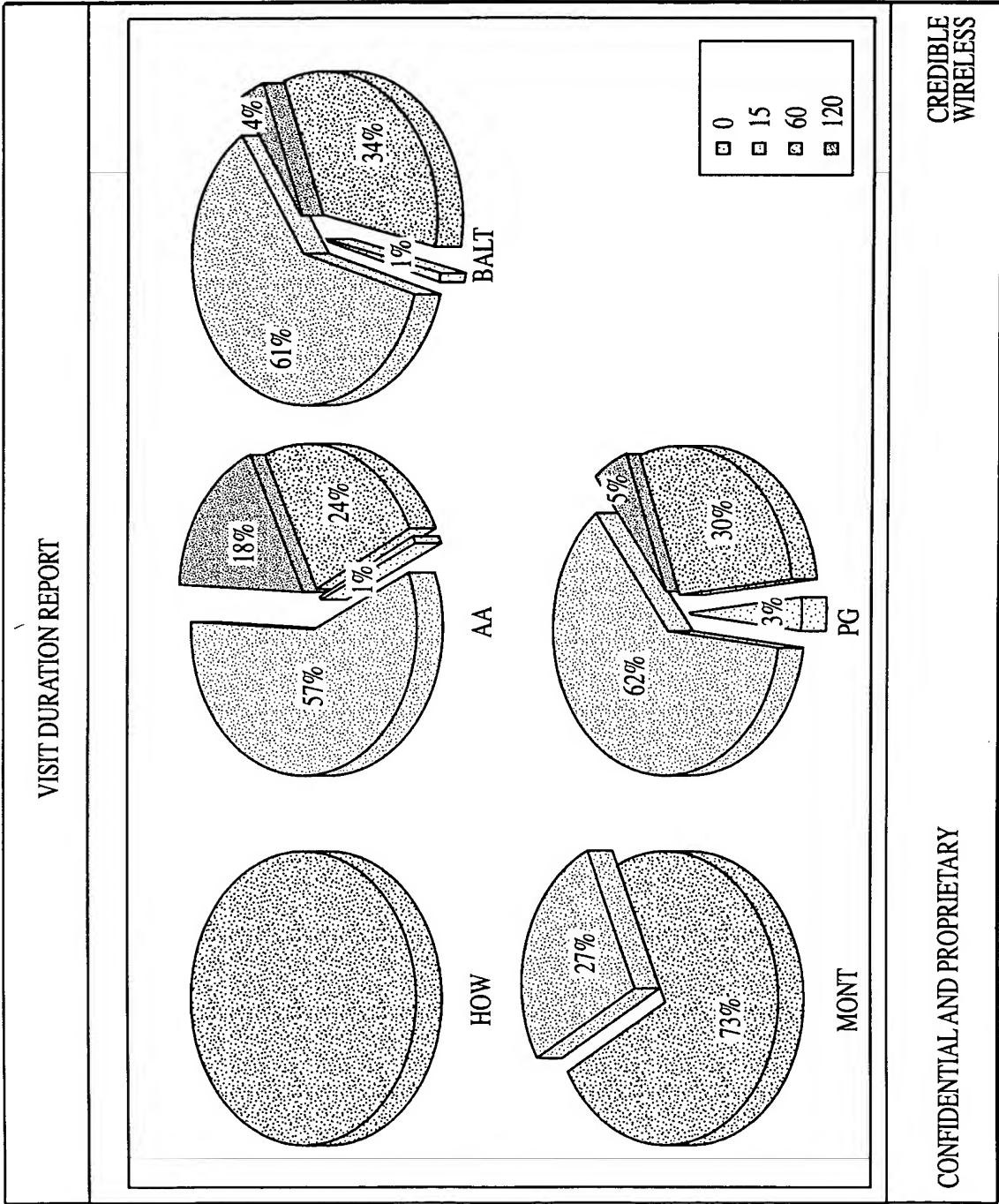


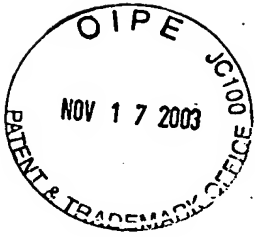
FIG. 37(b)



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VIEW DAILY STATUS: WHO'S ACTIVE						
DAILY TRACKER						
5/2/02	DATE: 01-MAY-2002					
STATUS/EMPLOYEE - STAFF W/ SCHEDULE	SCHEDULED	COMPLETED	ADMIN	CANCELLATIONS	LAST DOWNLOAD	
A	7	7	6	1	5/2/02 7:19:13AM	
B	2	0	1	1	5/3/02 7:59:48AM	
B	6	6	3		5/3/02 7:51:16AM	
C	3	4	3		5/2/02 7:39:03AM	
C	5	4	3		5/3/02 8:43:43AM	
C	7	6	10	1	5/3/02 7:26:28AM	
D	3	3	2		5/3/02 8:52:05AM	
E	8	5	5		5/1/02 7:15:57AM	
F	8	3	5	2	5/3/02 7:56:48AM	
G	3	2			5/2/02 8:37:00AM	
G	8	6	6		5/3/02 8:01:13AM	
G	1	0	1		5/3/02 10:03:44AM	
H	6	4	4		5/3/02 8:32:22AM	
L	8	6	8		5/3/02 7:59:52AM	
M	7	6	6		5/3/02 8:42:13AM	
M	2	1		1	5/2/02 7:05:43AM	
M	5	4	3		5/2/02 11:57:24AM	
P	1	0			4/27/02 12:32:28AM	
R	7	8	8		5/2/02 6:44:39AM	
S	9	5	6	4	5/3/02 8:44:51AM	
M	6	4	4	3	5/2/02 9:47:09AM	
M	5	4	3		5/2/02 11:57:24AM	
P	1	0			4/27/02 12:32:28AM	
R	7	8	8		5/2/02 6:44:39AM	
S	9	5	6	4	5/3/02 8:44:51AM	
S	6	4	4	3	5/2/02 9:47:09AM	
S	6	6	3		5/3/02 6:29:41AM	
W	10	5	6		5/3/02 9:50:02AM	
W	5	7	3	2	5/3/02 10:22:06AM	
CONFIDENTIAL AND PROPRIETARY						CREDIBLE WIRELESS

FIG. 37(c)



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CRYSTAL DECISIONS ACTIVEX VIEWER - MICROSOFT INTERNET EXPLORER
FILE EDIT VIEW FAVORITES TOOLS HELP

BACK · SEARCH · FAVORITES · MEDIA · LINKS

100% 1 OF 1

PREVIEW

AA BALD CO

AVERAGE VISITS REPORT
8/1/2003

REGION/SUPERVISOR/EMPLOYEE	VISIT COUNT	WORK DAYS*	AVERAGES
AA			
WEBB, DAVID	4	2	2.00
SUPERVISOR TOTAL/AVGS	4	2	2.00
AA TOTAL/AVGS	4	2	2.00

BALD CO

CHIMBERS, LISA
RADICS, FRANK
SUPERVISOR TOTAL/AVGS
BALD CO TOTAL/AVGS
COMPANY TOTAL/AVGS

7 4 1.75
7 4 1.75
7 4 1.75
11 6 1.83

DONE

ANALYTIC REPORTING

FIG. 37(d)



3805

REVIEW SELECTED VISITS FOR BATCH 3810

TOTAL VISITS (16) TYPE: --ALL-- REGION: --ALL-- START DATE: END DATE: FILTER

#	SUBMIT	PAYMENT	CPT CODE	RATE	CO-PAY	CLIENT NAME:	EMP NAME:	TYPE	STATUS	DATE	LENGTH	VIEW VISIT
175105	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9641	0	\$0	_____	_____	VISIT	COMPLETED	2/11/2002	40 MIN	<u>Q VIEW</u>
175407	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/12/2002	42 MIN	<u>Q VIEW</u>
175042	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/13/2002	27 MIN	<u>Q VIEW</u>
176245	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9542	0	\$0	_____	_____	VISIT	COMPLETED	2/25/2002	78 MIN	<u>Q VIEW</u>
176367	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/26/2002	47 MIN	<u>Q VIEW</u>
178740	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/27/2002	41 MIN	<u>Q VIEW</u>
175014	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/11/2002	38 MIN	<u>Q VIEW</u>
175464	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/12/2002	30 MIN	<u>Q VIEW</u>
175740	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/13/2002	21 MIN	<u>Q VIEW</u>
177471	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9542	0	\$3.72	_____	_____	VISIT	COMPLETED	2/21/2002	63 MIN	<u>Q VIEW</u>
178307	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/25/2002	39 MIN	<u>Q VIEW</u>
178631	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9541	0	\$0	_____	_____	VISIT	COMPLETED	2/27/2002	33 MIN	<u>Q VIEW</u>
170802*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W9542	0	\$3.72	_____	_____	VISIT	COMPLETED	2/28/2002	66 MIN	<u>Q VIEW</u>
178911	-COMBINED-					_____	_____	VISIT	COMPLETED	2/29/2002	28 MIN	<u>Q VIEW</u>
177545	X	<input type="checkbox"/>		3824		_____	_____	VISIT	COMPLETED	2/21/2002	62 MIN	<u>Q VIEW</u>

\$696 \$28.44

**INDICATES TOTAL NUMBER
OF SERVICES READY TO BE
SUBMITTED**

GENERATE TEXT FILE FOR BATCH

3820

FIG. 38



LOG IN | CLIENTS | PERSONNEL | PLANNER | ADMIN | BILLING | FEEDBACK | ECREDIBLEHOMECARE™

CREDIBLE
WIRELESS

3905

3910

3912

3914

3918

EDIT BATCHED CLAIMS

3920

3922

3924

STATUS: -- ALL OPEN --

START DATE:

END DATE:

FILTER

ID	DATE SUBMITTED	SVCS	INIT #	CUR #	PAID #	TOTAL	MUP	CHARGES	CURRENT PAID	CHARGES	BALANCES	SUBSCRIBER	STATUS	GCX	REGION	EDIT #	FILES	DELETED
71	3/11/02 2:46 PM	104	104	0	\$10237	\$10237	\$0	\$10237	\$0	\$10237	\$0	WEBB	BATCHED	1548	MOT	11/02/02		
73	3/11/02 6:00 PM	8	8	0	\$498	\$498	\$0	\$498	\$0	\$498	\$0	WEBB	BATCHED	4859	ANN	10/04/02		
75	4/3/02 1:30 PM	475	475	0	\$29933	\$29933	\$0	\$29933	\$0	\$29933	\$0	CHAMBERS	BATCHED	8652	MOT	12/01/02		

3916

3926

3928

3930

3932

3934

3936

3938

3940

3942

3944

FIG. 39



4002

[LOGIN](#) | [CLIENTS](#) | [PERSONNEL](#) | [PLANNER](#) | [ADMIN](#) | [BILLING](#) | [FEEDBACK](#) | [ECREDIBLEHOMECARE™](#)

RECONCILE BATCHED CLAIMS

CLAIM RECORDS: (13)

DATE BATCHED: 4/3/2002 6:06:56 PM

4022

ID	VISIT DATE	4004	VISIT TYPE	VISIT LENGTH	CPT CODE	CHARGE	CO-PAY	PAID AMOUNT	EX CODES	PAID REIPT	PEND RESUB
JOHN DOE			MEDICAID #:	148 3300	4780	4014	4016	CONTROL # 1795	4018	4020	PAID REIPT PEND RESUB

TO
APPLY
TO
CHECK
MARKS
TO ALL
BOXES,
USE ANY
OF
THESE
4 LINKS

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PETE DOE
MEDICAID#: 673 3085 2000
CONTROL #: 1494

[illegible]

4006

TOTALS:

TOTAL SERVICES: 13

\$704

44 \$0

4008 CHECK AMOUNT: \$613.68

BALANCE: \$613.68

UPDATE CLAIMS

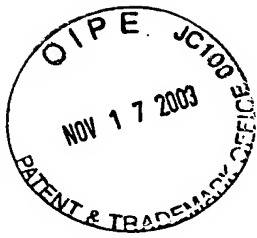
4016

FIG. 40

4020

(4024 4026 4028 4030

UPDATE CLAIMS



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LIST PARTNERS - MICROSOFT INTERNET EXPLORER
FILE EDIT VIEW FAVORITES TOOLS HELP SEND

HOME LOGOUT HELP

4102 4104 4108

FORMS CONFIG PARTNERS USERS

MONDAY, MAY 26, 2003 1:15:05 PM EST

MOBILEFORM™
>>> CONSOLE <<<

MOBILEFORM CONSOLE POWERED BY CREDIBLE WIRELESS

PARTNER LIST ABCDEFGHIJKLMNOPQRSTUVWXYZ ALL
SHOWING 1 TO 6 OF 6.

#	PARTNER NAME	CURRENT	PARTNER ID	LOGO	DOMAIN	REMOVE	ERASE DATE	DETAILS
1	CREDIBLE WIRELESS - DEMO	SWITCH	18	ADD GRAPHIC	DEMO	X DELETE	CLEAR ALL	VIEW
2	CREDIBLE WIRELESS	SWITCH	16	ADD GRAPHIC	TEST	X DELETE	CLEAR ALL	VIEW
3	DAVE CENTER2	SWITCH	38	ADD GRAPHIC	DAVID	X DELETE	CLEAR ALL	VIEW
4	GO GETTERS TEST	SWITCH	27	ADD GRAPHIC	GG	X DELETE	CLEAR ALL	VIEW
5	MASTER FORMS	SWITCH	1	ADD GRAPHIC	MASTER			VIEW
6	OHIO CSS	SWITCH	37	ADD GRAPHIC	OHIOCSS	X DELETE	CLEAR ALL	VIEW

ADD NEW

4110 4112 4114 4116 4118 4120 4122 4124 4126

CONSOLE APP -
"NO PROGRAMMING"

FIG. 41



PARTNER VIEW - MICROSOFT INTERNET EXPLORER
FILE EDIT VIEW FAVORITES TOOLS HELP SEND

LINKS

MOBILEFORM.
>>>CONSOLE<<<

HOME LOGOUT HELP

FORMS CONFIG PARTNERS USERS

MONDAY, MAY 26, 2003 1:15:05 PM EST

MOBILEFORM CONSOLE POWERED BY CREDIBLE WIRELESS

COMPANY NAME:
CREDIBLE WIRELESS - DEMO

COMPANY BANNER LABEL:
DEMO

PARTNER LOGIN DOMAIN:
INITIAL CATALOG=EHOMECARETRIAL;18;DATA SOURCE=63.999.999.99;11276;USER ID=XXXXXXXXXX;PASSWORD=999

PARTNER DB STRING (AUTO):
HTTP://DEMO.CREDIBLEWIRELESS.COM

PARTNER URL (AUTO):
EST

TIME ZONE:
COTHERAPY

BILLING CHECKBOX LABEL:
LABEL FOR CHECKBOX ON BILLING SCREEN (COTHERAPY:)

RECIPIENT LABEL:
LABEL FOR RECIPIENT ON BILLING SCREEN (RECIPIENT:)

MAX NOTES SIZE:
2000

MAX REENTER TIME:
MAXIMUM LENGTH OF THE CLIENT NOTES OPTIONAL BUTTON FIELDS (DEFAULT 2000)

OFFICE EMAIL ADDRESS:
MAXIMUM LENGTH OF TIME A PALM USER CAN EXIT THE APP BEFORE HAVING TO LOG BACK IN.

BCC EMAIL ADDRESS:
DEFAULT EMAIL ADDRESS FOR THE OFFICE.

DOMAIN NAME:
EMAIL ADDRESSES TO BCC ALL MESSAGES TO.

FAX FROM: ADDRESS:
DOMAIN OF FROM ADDRESS FOR EMAILS (IE: CREDIBLECARE.COM)

FROM: EMAIL ADDRESS FOR EFAX SENDS.

PARTNER OPTIONS

EHOMECARE L5 FLAG
EHOMECARE L5 BILLING

IS THIS CLIENT FOR AN E
DOES THIS CLIENT USE

ADJUST APP SETTINGS

DONE

FIG. 42



FORM - MICROSOFT INTERNET EXPLORER

FILE EDIT VIEW FAVORITES TOOLS HELP SEND

ADDRESS HTTP://BHCDB1.EHOMECARE.WS:5678/LIST_CATS.ASP?FVID=1

LINKS BEST OF THE WEB CHANNEL GUIDE CUSTOMIZE LINKS FREE HOTMAIL INTERNET EXPLORER NEWS INTERNET START WINDOWS

LIST CATEGORIES

SERVICE QUEUE CUSTOMERS EMPLOYEES REPORTS BUILD FORMS ADVANCED LOGOFF

ADD NEW CATEGORY BY ENTERING THE CATEGORY NAME AND WHERE TO PLACE IT.

CATEGORY NAME: SORT: 1 PLACE UNDER: -- TOP LEVEL CATEGORY -- ADD

EXISTING CATEGORIES:

4302

4308

4306

4304

4312

4310

CATEGORY NAME

INSPECTION

TREATMENTS

LIVING ROOM

SPECIFIC APPLIANCES

DINING ROOM

NEW TEST

ANOTHER LEVEL

LEVEL 4

LEVEL 5A

LEVEL 5B

KITCHEN

GENERAL AREA

BATHROOM 1

BATHROOM 2

BEDROOMS

FIELD INSPECTION CHECKLIST AND FINDINGS

TREATMENTS APPLIED - LOCATIONS AND CHEMICALS USED

TREATMENTS APPLIED TO LIVING ROOM

SPECIFIC APPLIANCES IN THE KITCHEN TEST

TREATMENTS APPLIED TO DINING ROOM

TREATMENTS APPLIED TO KITCHEN

GENERAL KITCHEN AREA

TREATMENTS APPLIED TO BATHROOM 1

TREATMENTS APPLIED TO BATHROOM 2

TREATMENTS APPLIED TO BEDROOMS

#SUB CATS

0

6

1

0

2

0

1

2

0

0

2

0

0

0

0

0

0

DELETE

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

UPDATE

FIG. 43

CATEGORY EDIT - MICROSOFT INTERNET EXPLORER		LINKS	
FILE EDIT VIEW FAVORITES TOOLS HELP SEND			
ADDRESS: HTTP://STOP.I.HOMECARE.WS:5678/CATEGORY.EDIT.ASP?EDIT=TRUE&CAT_ID=1 LINKS: BEST OF THE WEB CHANNEL GUIDE CUSTOMIZE LINKS FREE HOTMAIL INTERNET EXPLORER NEWS INTERNET START WINDOWS		THE BUG REAPER	
CATEGORY EDIT			
SERVICE QUEUE		LOGOFF	
CUSTOMERS		BUILD FORMS ADVANCED	
EMPLOYEES		REPORTS	
4402		4404	
EDIT CATEGORY: CATEGORY NAME: INSPECTION PLACE UNDER: -- TOP LEVEL CATEGORY -- 4406		DESCRIPTION: -- TOP LEVEL CATEGORY -- ORDER: 1 4408	
ADD NEW QUESTION BY ENTERING THE QUESTION TEXT, FORMAT AND ORDER. QUESTION:		ANSWER FORMAT: SELECT A FORMAT ORDER: 4 4414 4412	
EXISTING QUESTIONS:		4410	
QUESTION WHAT COLOR IS THE SKY? WHAT COLOR IS THE GRASS? WHAT TIME IS IT?	4416 4418 4420	ORDER 1 2 3	4422 4426
RETURN TO FORM LIST		REORDER	
PALM REVIEW		4424	

FIG. 44

FIG. 45(a)-1	FIG. 45(a)-3
FIG. 45(a)-2	

FIG. 45(a)

PALM OS EMULATOR

MASTERFORMS

ECREDIBLEHOMECARE

MOBILE FORM

USERNAME:

PASSWORD:

☐ DOWNLOAD NEW SCHEDULE

SUBMIT

MOBILE FORM

PALM OS EMULATOR

SAVING CONSUMER5

INFO

SCHEDULES WERE DOWNLOADED FOR 5 CONSUMER(S)

OK

PALM OS EMULATOR

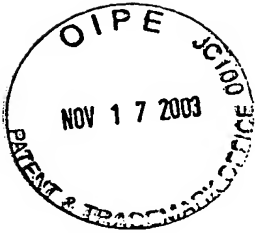
DAILY SCHEDULE

☐ HANSEL DOE 10:05 AM
☐ GEPETO DOE 11:05 AM
☐ CHRIS DOE 1:25 PM
☐ JOHN DOE 2:05 PM
☐ BUFFY BROWN 3:15 PM

ADD UNSCHEDULED

ADMIN TIME

FIG. 45(a)-1



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PALM OS EMULATOR	
DAILY SCHEDULE	<div><input type="checkbox"/> HANSEL DOE 10:05 AM</div> <div><input type="checkbox"/> GEPETO DOE 11:05 AM</div> <div><input type="checkbox"/> CHRIS DOE 1:25 PM</div>
CONFIRM	
<div><input type="radio"/> YOU MUST DOWNLOAD AN INTERVIEW TEMPLATE BEFORE STARTING. WOULD YOU LIKE TO DOWNLOAD AN INTERVIEW NOW?</div> <div><input type="radio"/> YES <input checked="" type="radio"/> NO</div>	
<div><div>OK</div><div>INFO</div><div>INTERVIEW SUCCESSFULLY DOWNLOADED.</div></div>	
TOTAL BYTES READ=59645	
CATEGORIES PROCESSED: 25	
QUESTION PROCESSED: 147	
PROCESSING INTERVIEW FILE. THIS MAY TAKE UP TO A FEW MINUTES.	
TOTAL BYTES READ=59645	
CATEGORIES PROCESSED: 25	
QUESTION PROCESSED: 147	
PALM OS EMULATOR	

FIG. 45(a)-2

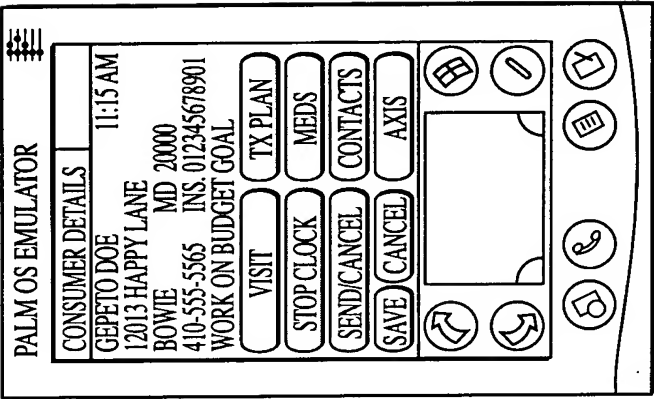
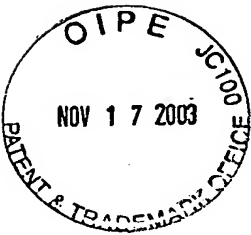
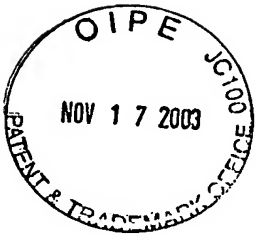


FIG. 45(a)-3



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FIG. 45(b)-1	FIG. 45(b)-3
FIG. 45(b)-2	

FIG. 45(b)

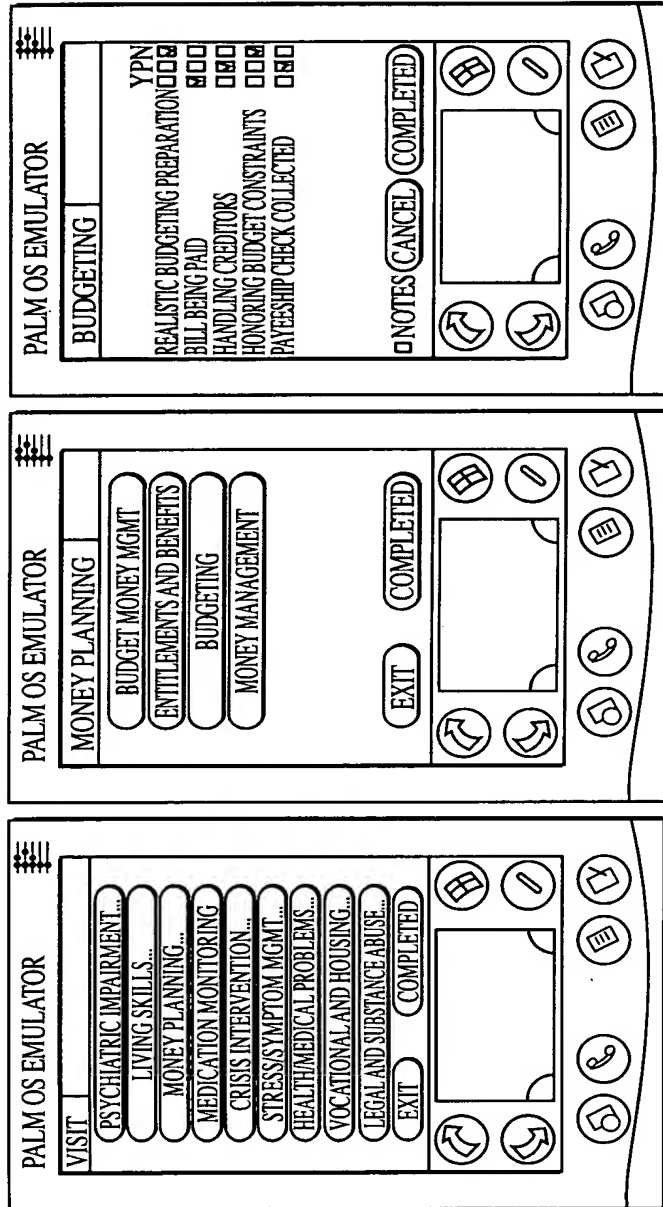


FIG. 45(b)-1



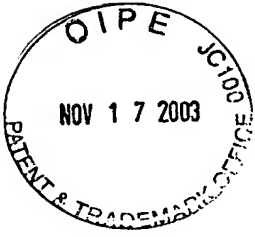
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PALM OS EMULATOR	
NOTES	CLIENT IS HANDLING MONEY MANAGEMENT SATISFACTORILY
CANCEL	COMPLETED

PALM OS EMULATOR	
MONEY PLANNING	
BUDGET MONEY MGMT	
ENTITLEMENTS AND BENEFITS	
BUDGETING	
MONEY MANAGEMENT	
EXIT	COMPLETED

PALM OS EMULATOR	
SIGNATURE CAPTURE	
EMPL	CONSUMER
CLEAR	SAVE

FIG. 45(b)-2



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PALM OS EMULATOR

CONSUMER DETAILS	11:15 AM
CEPETO DOE	
12013 HAPPY LANE	
BOWIE	MD 20000
410-555-5565	INS. 012345678901
WORK ON BUDGET GOAL	

CONFIRM

☐ DO YOU WISH TO SEND THIS SERVICE NOW?

YES NO










        

FIG. 45(b)-3



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PALM OS EMULATOR	
TOTAL BYTES READ=175	
SENDING SERVICE: GEPETO DOE	
INFO	
CONSUMER SERVICE UPLOAD SUCCESSFUL. OK	

PALM OS EMULATOR	
DAILY SCHEDULE	
<input type="checkbox"/> GEPETO DOE	<input type="checkbox"/> 1:25 PM
<input type="checkbox"/> CHRIS DOE	<input type="checkbox"/> 11:35 AM
<input type="checkbox"/> JOHN DOE	<input type="checkbox"/> 10:05 AM
<input type="checkbox"/> HANSEL DOE	<input type="checkbox"/> 1:05 PM
CONFIRM	
DO YOU WISH TO SEND THIS SERVICE NOW?	
YES	NO

PALM OS EMULATOR	
DAILY SCHEDULE	
<input type="checkbox"/> CHRIS DOE	<input type="checkbox"/> 1:25 PM
<input type="checkbox"/> GEPETO DOE	<input type="checkbox"/> 11:35 AM
<input type="checkbox"/> JOHN DOE	<input type="checkbox"/> 10:05 AM
<input type="checkbox"/> HANSEL DOE	<input type="checkbox"/> 1:05 PM
<input type="checkbox"/> DAVE DOE	<input type="checkbox"/> 1:05 PM
ADD UNSCHEDULED ADMIN TIME	

FIG. 45(c)



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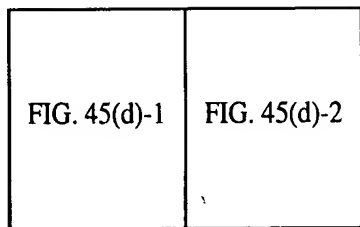


FIG. 45(d)

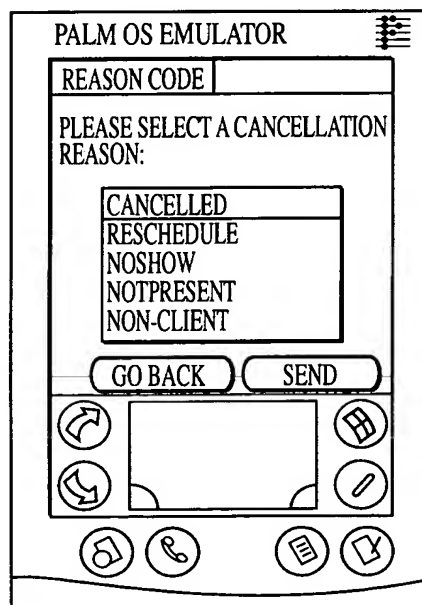
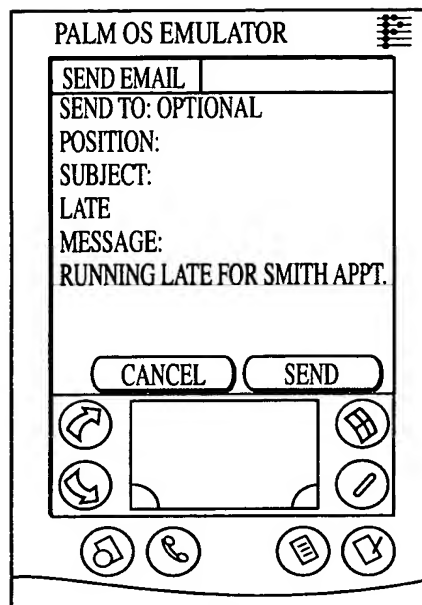


FIG. 45(d)-1



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PALM OS EMULATOR

MAPQUEST DIRECTIONS

ENTER THE ADDRESS OF YOUR
CURRENT LOCATION
STREET ADDRESS: OPTIONAL

ENTER ZIP CODE OR CITY AND STATE:
ZIP CODE:
CITY:
STATE:

CANCEL SEND

Navigation icons: back, forward, home, search, etc.

PALM OS EMULATOR

AXIS

AXIS 1: 296.55 - BIPOLAR I, DEP,
PT REMIS

AXIS 2: 301.9 - PERSONALITY
DISORDER NOS

AXIS 3: 360.42 - BLIND
HYPERTENSIVE EYE

AXIS 4:
AXIS 5:

OK

Navigation icons: back, forward, home, search, etc.

FIG. 45(d)-2



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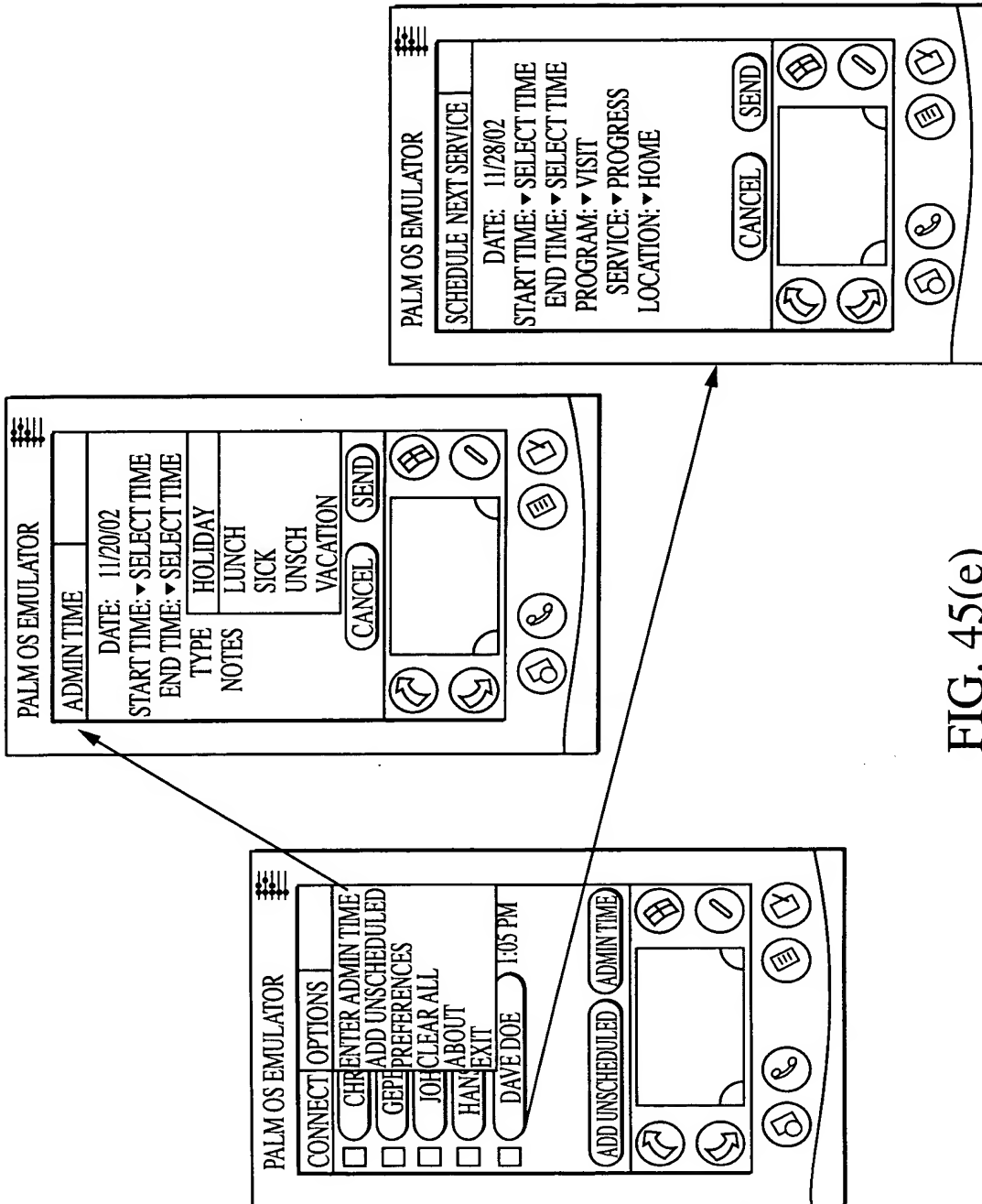
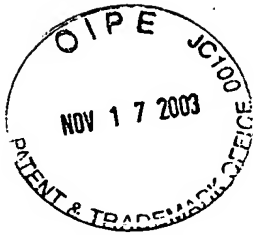


FIG. 45(e)



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FIG. 45(f)-1
FIG. 45(f)-2

FIG. 45(f)

PALM OS EMULATOR

CONNECT OPTIONS

☐ CHR ENTER ADMIN TIME
☐ ADD UNSCHEDULED
☐ GEPI PREFERENCES
☐ JOH CLEAR ALL
☐ HAN ABOUT
☐ EXIT
☐ DAVE DOE 1:05 PM

ADD UNSCHEDULED

ADMIN TIME

PALM OS EMULATOR

UNSELECTED CONSUMER

▼ SELECT DATA REPORT

NAME:
ID #:
PHONE:
ADDRESS:
DOB:
SSN:
PROGRAM: ▼ SELECT PROGRAM
SERVICE: ▼ SELECT SERVICE TYPE

CANCEL

OK

PALM OS EMULATOR

UNSELECTED CONSUMER

1881 BUFFY BROWN
2092 MIKE DOE
5426 JOHN BROWN
5263 JILL BLACK
4251 MARY DOE
ADDRESS:
DOB:
SSN:
PROGRAM: ▼ SELECT PROGRAM
SERVICE: ▼ SELECT SERVICE TYPE

CANCEL

OK

FIG. 45(f)-1



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PALM OS EMULATOR	
CONNECT OPTIONS	
DOWNLOAD SCHEDULE 05 PM	
DOWNLOAD INTERVIEW	
SEND ADMIN TIME	
<input type="checkbox"/> JOHN DOE 11:35 AM	
<input type="checkbox"/> HANSEL DOE 10:05 AM	
<input type="checkbox"/> DAVE DOE 1:05 PM	
ADD UNSCHEDULED	ADMIN TIME
<div>Navigation icons: back, forward, home, search, etc.</div>	

PALM OS EMULATOR	
UNSCHEDULED CONSUMER	
5426 JOHN BLACK	
PROGRAM: ▾ VISIT	
SERVICE: ▾ PROGRESS	
CANCEL	OK
<div>Navigation icons: back, forward, home, search, etc.</div>	

FIG. 45(f)-2

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QUESTION EDIT - MICROSOFT INTERNET EXPLORER

FILE EDIT VIEW FAVORITES TOOLS HELP SEND

HOME LOGOUT HELP

FORMS CONFIG PARTNERS USERS

MONDAY, MAY 26, 2003 1:15:05 PM EST

MOBILEFORM.

>>>CONSOLE<<<

MOBILEFORM CONSOLE POWERED BY CREDIBLE WIRELESS

EDIT QUESTION:

QUESTION: SUICIDAL THOUGHTS

ORDER: 7

SPACING: 0

ALIGN: RIGHT

NO LABEL RADIO BUTTON

LABEL X: 1

CONTROL X: 130

BOLD: FALSE

LINE BREAK: FALSE

MULTI LINE: 1

AFT SPACING: 0

FIELD MAP: UPDATE QUESTION

SELECT FIELD

ANSWER:

ADD NEW ANSWER BY ENTERING THE ANSWER TEXT.

ANSWER: CLIENT EXPRESSED SUICIDAL THOUGHTS.

LONG TEXT:

EXISTING ANSWERS:

ANSWER	ORDER	HAS NOTES	DELETE
Y	1	NO	X
P	2	NO	X
N	3	NO	X

BUILD, EDIT

DATA CAPTURE FORMS

SET UP AND CONFIGURATION - MICROSOFT INTERNET EXPLORER									
FILE EDIT VIEW FAVORITES TOOLS HELP SEND									
ADDRESS HTTP://EHCDB1.EHOMECARE.WS.5678/LIST_CONFIG.ASP									
LINKS BEST OF THE WEB CHANNEL GUIDE CUSTOMIZE LINKS FREE HOTMAIL INTERNET EXPLORER NEWS INTERNET START WINDOWS									
THE BUG REAPER									
SET UP AND CONFIGURATION									
SERVICE QUEUE	CUSTOMERS	EMPLOYEES	REPORTS	BUILD FORMS	ADVANCED	LOGOFF			
4718	4720	4722	4724	4726	4728	4730			
COMPANY NAME THE BUG REAPER ~ 4702									
COMPANY LOGO /IMAGES/BR_LOGO.GIF ~ 4704									
COLOR SCHEME BLACK AND PERIWINKLE ~ 4706									
CUSTOMER LIST? ACTIVATED ~ 4708									
SCHEDULING MODULE? ACTIVATED ~ 4710									
PARTS AND LABOR MODULE? ACTIVATED ~ 4712									
EXTENDED TIME TRACKING? ACTIVATED ~ 4714									
LABELS CUSOTMER: CUSTOMER SERVICE ENCOUNTER: TREATMENT EMPLOYEE: BUG REMOVAL ARTIST ~ 4716									

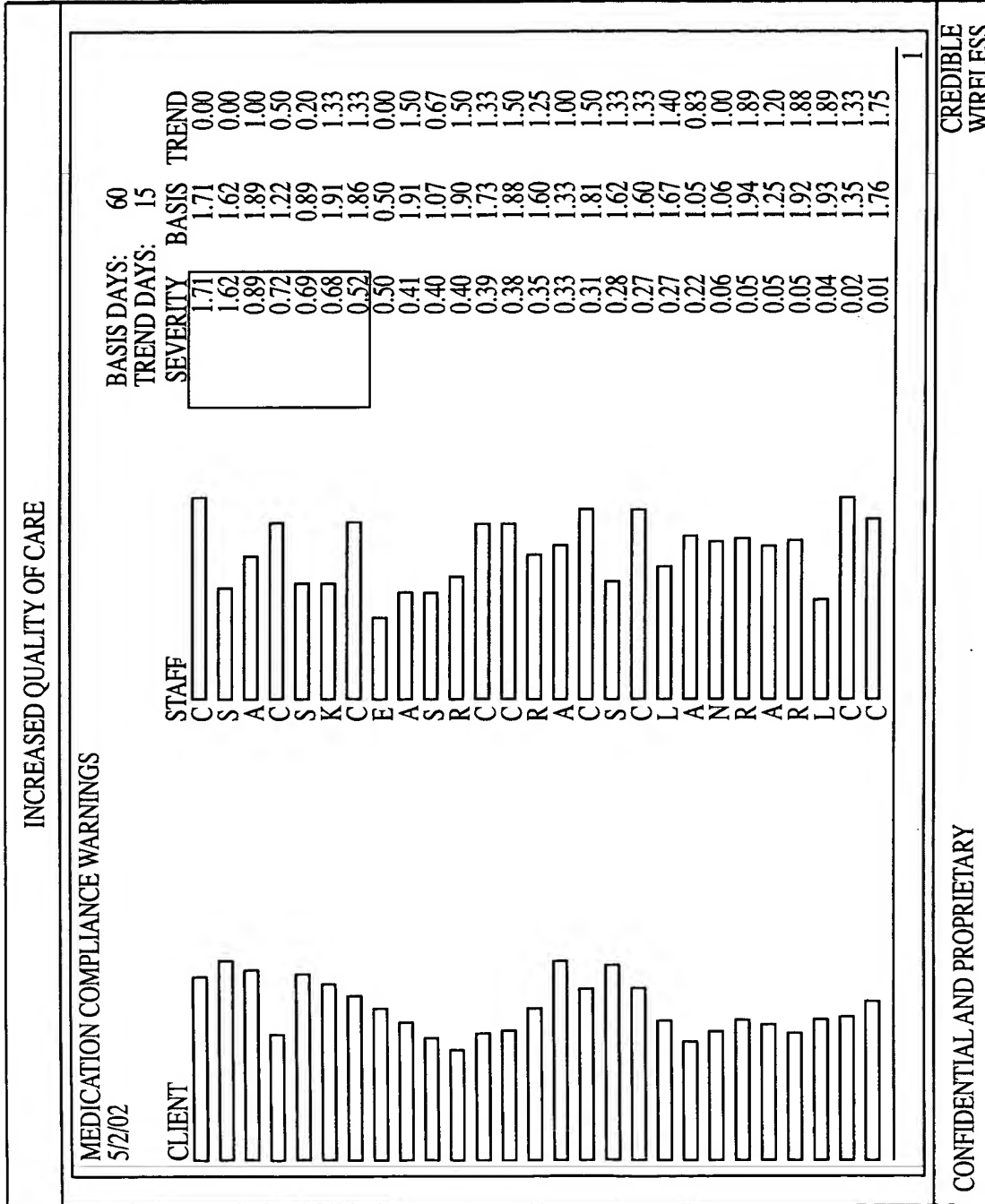


FIG. 48(a)



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REPLICATE OLD "PAPERWORK"			
<div></div> <div>CARE CONNECTION, INC. - PSYCHIATRIC REHABILITATION PROGRAM OFF-SITE DAILY SERVICE RECORD AND CONTACT SHEET OFF-SITE REHABILITATION PROVIDED</div>			
1215 ANNAPOLIS ROAD • SUITE 202 • ODENTON, MD 21113 • TEL 410.519.1209 • FAX 410.519.1208			
MEMBER NAME: INSURANCE ID: STAFF NAME: REVIEWER COMMENT:	JOHN DOE 873878277 FRANK RADICS	TIME IN: TIME OUT:	2/5/2001 4:10:00 PM 2/5/2001 4:58:00 PM
B2 COMMUNITY LIVING SKILLS		TIME IN: 2/5/2001 4:31:00 PM	TIME OUT: 2/5/2001 4:32:00 PM
LINKAGE TO RESOURCES RECREATION		COMMENTS: TRANSPORTED CLIENT TO THE BANK. COMMENTS:	
COMMUNICATION SKILLS	ABLE TO EXPRESS THOUGHTS AND FEELINGS TO: ABLE TO EXPRESS WANTS AND NEEDS TO:	COMMENTS:	
ENTITLEMENTS AND BENEFITS		COMMENTS:	
DEVELOPMENT OF SUPPORT NETWORK		COMMENTS:	
COMMUNITY SAFETY	AWARENESS OF CAR SAFETY:	COMMENTS:	
SOCIAL SKILLS	APPRECIATE INTERACTIONS WITH:	COMMENTS:	
CLIENT BEHAVIOR AND REPORT ATTITUDE MOOD: AFFECT: PERCEPTION: THOUGHT FLOW: THOUGHT CONTENT:	ANXIOUS, COOPERATIVE, GUARDED APPROPRIATE TO CONTEXT/THINKING NORMAL DECREASED THOUGHT FLOW APPROPRIATE		
CONFIDENTIAL AND PROPRIETARY		CREDIBLE WIRELESS	

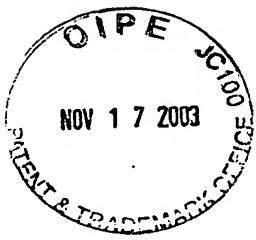
FIG. 48(b)



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SIGNATURES "ATTACHED"			
NETWORK:			
COMMUNITY SAFETY	AWARENESS OF CAR SAFETY:	COMMENTS:	
SOCIAL SKILLS	APPROPRIATE INTERACTIONS WITH:	COMMENTS:	
CLIENT BEHAVIOR AND REPORT			
ATTITUDE MOOD:			ANXIOUS, COOPERATIVE, GUARDED
AFFECT:			APPROPRIATE TO CONTEXT/THINKING
PERCEPTION:			NORMAL
THOUGHT FLOW:			DECREASED THOUGHT FLOW
THOUGHT CONTENT:			APPROPRIATE
B3 MEDICATION MONITORING			
TIME IN: 2/5/2001 4:11:00 PM		TIME OUT: 2/5/2001 4:30:00 PM	
GENERAL	TAKING PRESCRIBED MEDS: Y	COMMENTS:	..PUT CLIENTS PILLS IN BOX FOR THE WEEK.
CLIENT BEHAVIOR AND REPORT			
ATTITUDE MOOD:			ANXIOUS, COOPERATIVE
AFFECT:			APPROPRIATE TO CONTEXT/THINKING
PERCEPTION:			NORMAL
THOUGHT FLOW:			DECREASED THOUGHT FLOW
THOUGHT CONTENT:			APPROPRIATE
f. Radics	John Doe	Andrea E. Tranen	
STAFF SIGNATURE	CLIENT SIGNATURE	M.S., N.C.C.	
		SUPERVISOR'S SIGNATURE	
		APPROVED BY SONDRAN TRANEN ON 2/8/2001 4:15:58 PM	
CONFIDENTIAL AND PROPRIETARY		CREDIBLE WIRELESS	

FIG. 48(c)



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EASILY VIEWED WEEKLY SCHEDULE										
CREDIBLE WIRELESS		ECREDIBLEHOMECARE™								
LOGIN	CLIENTS	PERSONNEL	PLANNER	ADMIN						
((PREV)) WEEKLY PLANNER FOR COL (NEXT)) • 9/30/2001										
SUN 9/30/2001 MON 10/1/2001 TUE 10/2/2001 WED 10/3/2001 THU 10/4/2001 FRI 10/5/2001 SAT 10/6/2001										
GROUP (4) <input type="checkbox"/> M DE DE G DE DE										
(SCHEDULED) (COMPLETE) (COMPLETE) (RESCHEDULE) <input type="checkbox"/> (CANCELLED) <input type="checkbox"/>										
IN: 8:46 AM <input type="checkbox"/> IN: 9:01 AM <input type="checkbox"/> 4:00 PM 9:00 AM										
OUT: 9:30 AM 9:00 AM										
DOE, J (SCHEDULED) <input type="checkbox"/> PL (SCHEDULED) <input type="checkbox"/>										
9:00 AM 10:00 AM										
DE (COMPLETE) PL (COMPLETE) (COMPLETE) (COMPLETE) <input type="checkbox"/>										
IN: 9:31 AM <input type="checkbox"/> IN: 10:04 AM <input type="checkbox"/>										
OUT: 11:34 AM 10:00 AM										
OUT: 11:15 AM 10:30 AM										
PL (COMPLETE) <input type="checkbox"/> SEL (SCHEDULED) <input type="checkbox"/>										
IN: 11:30 PM <input type="checkbox"/> IN: 12:45 PM <input type="checkbox"/>										
OUT: 1:00 PM 1:00 PM										
11:30 PM 1:30 PM										
BIL (COMPLETE) <input type="checkbox"/> SEL (COMPLETE) <input type="checkbox"/>										
IN: 1:32 PM <input type="checkbox"/> IN: 12:45 PM <input type="checkbox"/>										
OUT: 1:59 PM 1:00 PM										
1:30 PM 1:30 PM										
GIL (COMPLETE) M (COMPLETE) <input type="checkbox"/>										
IN: 2:16 PM <input type="checkbox"/> IN: 1:30 PM <input type="checkbox"/>										
OUT: 3:59 PM 1:30 PM										
2:15 PM 3:00 PM										
BIL (COMPLETE) <input type="checkbox"/> SI (SCHEDULED) <input type="checkbox"/>										
IN: 3:00 PM <input type="checkbox"/> A (SCHEDULED) <input type="checkbox"/>										
OUT: 3:56 3:00 PM										
3:00 PM										
ADD TO SCHEDULE:										
DAY	ASSIGNED CLIENT	OTHER CLIENT (ID#)	SCHEDULED TIME	POSITION	STATUS	VISIT TYPE				
SUN	SELECT CLIENT		NONE	NEXT	SCHEDULED	CLIENT VISIT				
PLAN NOTES:						ADD PLAN				
CONFIDENTIAL AND PROPRIETARY						CREDIBLE WIRELESS				

FIG. 48(d)



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FIG. 48(e)

PAYROLL REPORT: FROM 8 HOURS TO 1														CREDIBLE WIRELESS								
PAYROLL REPORT		PERIOD START: 01-APR-2002																				
5/2/02		PERIOD END: 14-APR-2002																				
DOUBLE-CLICK ON AN EMPLOYEE'S NAME TO VIEW DETAILED TIME PUNCHES.																						
A [REDACTED]	V/H/EFF: 56/57.13/0.98 ROUNDED HRS: 57.25	4/01	MON	4/02	TUE	4/03	WED	4/04	THU	4/05	FRI	4/08	MON	4/09	TUE	4/10	WED	4/11	THU	4/12	FRI	TOTAL
		0.22	0.92	1.80	1.17	0.30	1.58	1.62	1.88	4.63	0.53											
		0.88	4.15	3.93	4.47	3.95	6.12	5.17	5.50	3.65	4.67											
		1.10	5.07	5.73	5.64	4.25	7.70	6.79	7.38	8.28	5.20											
													14.65									
											42.49											
											57.14											
B [REDACTED]	V/H/EFF: 13/80.72/0.16 ROUNDED HRS: 80.75	4/01	MON	4/02	TUE	4/03	WED	4/04	THU	4/05	FRI	4/08	MON	4/09	TUE	4/10	WED	4/11	THU	4/12	FRI	TOTAL
		8.00	8.00	7.25	8.50	6.32	6.42	7.97	6.98	5.98	7.95											
		0.00	0.00	1.03	0.00	0.93	2.00	0.53	1.32	1.20	0.33											
		8.00	8.00	8.28	8.50	7.25	8.42	8.50	8.30	7.18	8.28											
													73.37									
											7.34											
											80.71											
B [REDACTED]	V/H/EFF: 68/83.48/D.61 ROUNDED HRS: 83.50	4/01	MON	4/02	TUE	4/03	WED	4/04	THU	4/05	FRI	4/08	MON	4/09	TUE	4/10	WED	4/11	THU	4/12	FRI	TOTAL
		1.45	2.22	3.47	4.58	3.20	1.63	0.33	3.20	4.67	1.63	1.00										
		6.82	7.58	5.90	4.28	3.78	5.83	2.62	3.97	5.98	5.87	3.47										
		8.27	9.80	9.37	8.86	6.98	7.46	2.95	7.17	10.65	7.50	4.47										
													27.38									
											56.10											
											83.48											
C [REDACTED]	V/H/EFF: 39/82.08/D.48 ROUNDED HRS: 82.00	4/01	MON	4/02	TUE	4/03	WED	4/04	THU	4/05	FRI	4/08	MON	4/09	TUE	4/10	WED	4/11	THU	4/12	FRI	TOTAL
		1.62	2.18	2.12	5.00	1.88	9.48	8.00	1.83	4.58	1.17											
		6.33	6.20	6.07	4.03	5.33	0.00	0.00	7.17	4.75	4.25											
		0.00	0.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00											
		7.95	8.46	8.19	9.03	7.21	9.48	8.00	9.00	9.33	5.42											
											37.86											
											44.13											
											0.08											
											82.07											
CONFIDENTIAL AND PROPRIETARY														CREDIBLE WIRELESS								